



## **Georgia Department of Banking and Finance**

# **APPLICATION AND JURISDICTION SPECIFIC INSTRUCTIONS**



## **Georgia Residential Mortgage License or Registration**

**LENDER**

**BROKER / PROCESSOR**



Department of Banking and Finance  
Non-Depository Financial Institutions Division  
2990 Brandywine Road, Suite 200  
Atlanta, GA 30341-5565  
<http://dbf.georgia.gov>

**REVISED JULY 2008**

**GENERAL INFORMATION AND JURISDICTION-SPECIFIC REQUIREMENTS FOR GEORGIA  
APPLICATION AND AMENDMENT FORMS  
FOR MORTGAGE LENDER, BROKER/PROCESSOR LICENSES & REGISTRATIONS**

**Application(s) and Required Forms**

Georgia is among several states that have adopted the Uniform Mortgage Lender/Broker License Application (Form MU1), the Uniform Mortgage Biographical Statement & Consent Form (Form MU2), and the Uniform Mortgage Branch Office Form (Form MU3) as adopted by the joint American Association of Residential Mortgage Regulators (AARMR)/Conference of State Supervisors (CSBS) Residential Mortgage Regulatory Task Force (RMRT).

These forms are being utilized by many states for license applications in order to standardize the application process for licensees who operate in various state jurisdictions. Applicants for a Georgia Lender or Broker/Processor license or registration must complete the appropriate MU forms and submit Georgia jurisdiction specific required information to the Department along with all completed MU forms. Georgia jurisdictional specific information required and application requirement guidance are contained in these instructions. **Note - the JURISDICTION is GEORGIA for purposes of this application.**

**FORMS OVERVIEW**

- ▶ MU1 Form - Uniform Mortgage Lender/Mortgage Broker Form (License Application) - is the general application form to be used when making an initial application for a license or registration, or when making amendments to an existing application. This form is also used to UPGRADE an existing license or REINSTATE an expired or withdrawn license. Main office relocations and mailing address changes are done ON-LINE at <http://dbf.georgia.gov/dbfmtgforms>. DO NOT use the MU1 Form. A name change (Change in Business Structure) requires a separate application found on the web at <http://dbf.georgia.gov/dbfmtgforms>.
- ▶ MU2 Form - Uniform Mortgage Biographical Statement & Consent Form - is the form needed for each control person listed on Schedule A of the Form MU1. A Control Person is defined to include any person who: i) is a director, officer, partner, agent, employee, or ultimate equitable owner of 10 percent or more of the applicant or licensee or ii) any individual who directs the affairs or establishes policy for the applicant or licensee. Such control persons include Branch Managers for purposes of completing the application for Branch Office Form. *Please see additional definitions contained in this application for any other management personnel requiring Department approval. The MU2 Form is included herein-copy as required.*
- ▶ MU3 Form - Uniform Mortgage Branch Office Form - is the Branch Office form accompanying the Form MU1-Uniform Mortgage Lender/Mortgage Broker form and which is also used to establish additional branch offices in Georgia subsequent to the initial application. The applicant must also refer to Georgia jurisdiction-specific requirements related to opening new branch offices. In order to open additional branch offices in Georgia, the applicant must complete the MU3 and submit this with the completed MU2 form, along with other required documentation, to the Department.

**APPLICATION REQUIREMENTS**

In order to complete the application for a mortgage broker, processor or lender license or registration, you will need to utilize forms MU1 and MU2. IF you are applying for a branch location(s), you will need to complete the MU3 form as well for each branch, and submit an MU2 for each branch manager. The MU2 is included herein. The MU3 must be downloaded separately as noted below and also includes the MU2 form and instructions.

In addition, there are jurisdiction (State of Georgia) specific requirements for information or documentation that must be submitted with the application. There is a checklist contained in this application package which provides a summary of the information required to be submitted with the application.

**All REQUIRED MU forms are also available at: <https://dbf.georgia.gov/dbfmtgforms>**

# ATTENTION OUT OF STATE APPLICANTS

## Instructions for a Georgia Residential Mortgage Broker/Processor License

If you are applying for a license as a Georgia Residential Mortgage Broker/Processor and your home state (i.e., the state where your principal place of business is located) is a state other than Georgia and you have no physical presence in Georgia, please read the following:

The Official Code of Georgia § 7-1-1003.1 states, in part, that if the applicant for a new or renewal mortgage broker/processor license does not have a physical place of business in Georgia, then a license or renewal may only be issued if the applicant's home state also does not require that in order to be licensed a mortgage broker/processor must have a physical place of business in their home state. Currently the states of Alabama, Idaho, Kentucky, Missouri, Nevada, New Jersey, North Carolina, Ohio, Oklahoma, Pennsylvania, South Carolina and Texas have the requirement that the broker/processor have a physical place of business in their home state.

If this situation exists and you obtained a broker's license prior to the July 1, 1998 change in the law, we will not be able to renew your license until you obtain a physical location in Georgia. New applicants must also meet this physical location requirement. This location must be staffed by at least one supervised employee. It cannot be a post office box or any other place where the public receives mail, deliveries or messages.

Prior to submitting an application to Georgia, please check with your home state mortgage regulator to determine the physical location requirements in your state.

## NOTICE TO NEW APPLICANTS FILING AN APPLICATION BEFORE APRIL 1

An application for a new license or registration received between January 1<sup>st</sup> and April 1<sup>st</sup> in any given year for which a license or registration is issued prior to April 1 (renewal due date) of that same year will be subject to the renewal process for that year as prescribed in O.C.G.A. § 7-1-1005.

Therefore please note the following approval process:

- ▶ Any application filed after January 1<sup>st</sup> but prior to April 1<sup>st</sup> in any given year will be processed and, if approved, will have to be renewed by April 1<sup>st</sup> **of the same year**. If not renewed, such license or registration will expire on June 30<sup>th</sup> of that same year.
- ▶ DO NOT submit an application prior to April 1<sup>st</sup> for a new license or registration if you DO NOT want it approved prior to April 1<sup>st</sup>. It is the applicant's responsibility to be aware of this requirement. Failure by the applicant to hold the application until after April 1<sup>st</sup>, if it is approved prior to April 1<sup>st</sup>, will require a RENEWAL APPLICATION FOR THAT SAME RENEWAL PERIOD!

**Inquiries concerning licensing and the preparation and filing of an application should be directed to:**

**Department of Banking and Finance  
Non-Depository Financial Institutions Division  
2990 Brandywine Road, Suite 200  
Atlanta, Georgia 30341-5565.  
Telephone (770) 986-1136  
OR E-mail questions to [newapps@dbf.state.ga.us](mailto:newapps@dbf.state.ga.us)**

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| <b>UNIFORM APPLICATION FORMS – MU1, MU2, MU3</b><br><b>LICENSEE CHECKLIST - Does your completed application package contain . . . . ?</b> |
|---|

- \_\_\_\_\_ **LICENSED/REGISTERED BROKER/PROCESSOR** - \$250 Investigation fee plus \$500 Annual License Fee.  
**LICENSED/REGISTERED LENDER** - \$250 Investigation Fee plus \$1,000 Annual License Fee.  
**(License and Investigation fees may be combined on one check. Submit a Money Order or Certified Funds made out to the Department of Banking & Finance.)**
  
- \_\_\_\_\_ **BRANCHES** – The initial license fee for a broker/processor or lender license covers the main office and one additional branch office. Additional branch offices beyond the first one are assessed a fee of **\$350** each. If applicable to this application, include this fee in the payment noted above. Include all Branch/Branch Manager information.
  
- \_\_\_\_\_ **Form MU1 - License Application** - Completed Questionnaire and form **SIGNED** by authorized official.
  
- \_\_\_\_\_ **Form MU2 – Biographical Information** - Completed for **EACH** control person and branch manager as noted in the application. \_\_\_\_\_ Photo(s) of all persons completing a MU2 Form
  
- \_\_\_\_\_ **Form MU3 – Branch Application** - Completed for **EACH** branch to be operated as noted in the application.
  
- \_\_\_\_\_ Copy of Articles of Incorporation or Organization or Partnership Agreement (applicable form or NA).
  
- \_\_\_\_\_ One complete **SET** of fingerprint cards (two cards per SET, **signed**) is required for all individuals in the application, including branch managers. See card information herein for complete instructions and details. The processing fee is \$30.00 per set per individual (\$15.00 per card). **Include a separate money order or certified check (apart from check for application/investigation fee) for fingerprint cards, made payable to the Department.**
  
- \_\_\_\_\_ Background check authorization form (**signed**) for all individuals noted in application. ***NOTE: This authorization remains effective as long as the individuals are employed in the mortgage industry.***
  
- \_\_\_\_\_ Signature and Oath of Applicants Form (Business or Individual as applicable)
  
- \_\_\_\_\_ Personal credit report on all required individuals (**explanations** of existing derogatory accounts along with **proof** of settlement.) ***Applications reflecting unresolved tax liens, judgments, or bankruptcies will be returned.***
  
- \_\_\_\_\_ **SURETY BOND REQUIREMENT: (ORIGINAL of Bond Form **MUST** be sent to the Department)**
  - **BROKERS/PROCESSORS** - \$50,000 surety bond OR \$50,000 Irrevocable Letter of Credit (**Department format required-contact Department for form**) from a federally insured financial institution.
  - **LENDERS** - \$150,000 surety bond OR \$150,000 Irrevocable Letter of Credit (**Department format required-contact Department for form**) from a federally insured financial institution.**Surety bonds MUST be signed. All d/b/a names must be included in the bond or contained in a rider. Registration of d/b/a name with the appropriate registration authority must be submitted.**
  
- \_\_\_\_\_ **LENDER APPLICANT ONLY:** Submit copy of most recent financial statement or audit, or if newly organized, a copy of the pro-forma balance sheet. \_\_\_\_\_ Original completed IRS 4506T form.
  
- \_\_\_\_\_ **BROKER/PROCESSOR ONLY** - Copies of W2's covering recent 2 years experience in the mortgage industry or proof of education. \_\_\_\_\_ Original completed IRS 4506T form, and letters of reference from employer.
  
- \_\_\_\_\_ Policies and Procedures for **grievances and inquiries** (a sample policy is included **only** for reference).
  
- \_\_\_\_\_ Policies and Procedures for **grievances and inquiries** (a sample policy is included **only** for reference).
  
- \_\_\_\_\_ Provide the general **business plan** and character of the activities to be conducted by the applicant and any mortgage business related entity that owns a majority controlling interest in the applicant.

***This is an initial checklist for your benefit. The Department reserves the right to request additional information or documentation. Should you have any questions, please call the Mortgage Division at (770) 986-1136.***



**GEORGIA DEPARTMENT OF BANKING AND FINANCE**  
**2990 Brandywine Road, Suite 200**  
**Atlanta, Georgia 30341-5565**  
**770-986-1136**

**IMPORTANT DATES TO REMEMBER**

- February** Annual License/Registration renewal notices are sent out in February and applications must be completed no later than April 1<sup>st</sup>. Any **renewals** received after April 1<sup>st</sup> will be subject to a **\$300 late fee plus the annual renewal fee** and will be worked as time permits. Keep in mind that during the renewal period the Department still receives new applications and these must also be reviewed in a timely manner, so renewals that are not received by the due date (April 1<sup>st</sup>) are secondary at this time.
- March 1<sup>st</sup>** \$6.50 "per loan fees" for period July 1<sup>st</sup> - December 31<sup>st</sup> due in Department.
- April 1<sup>st</sup>** Annual License/Registration renewal applications due in the Department.
- June 1<sup>st</sup>** Surety Bond cancellation/non-renewal notices due to the Department by Surety.
- Mid-June** Annual Licenses/Registrations that are approved for **renewal** for the coming year will be mailed beginning mid to late June and continue through the first week of July. Status of a license may be determined by checking the web at <http://dbf.georgia.gov/dbfmtg>.
- July 1<sup>st</sup>** Licenses/Registrations that were not renewed for the coming year will expire on this date and licensees must cease doing business on Georgia residential properties.
- September 1<sup>st</sup>** \$6.50 "per loan fees" for period January 1<sup>st</sup> - June 30<sup>th</sup> due in Department.

**GRMA-CODE SECTIONS (Article 13) & DEPARTMENT RULES**

Please note that the **Georgia Residential Mortgage Act (GRMA)** (the law/code sections), the **Department Regulations** (Rules) related to GRMA, and the IRS **Request for Transcript of Tax Return** Form 4506T are available for download from the Department's web site. They are **NOT** contained in this same document with the application, but are referenced herein as a part of the **complete application package**. Applicants **MUST** download these forms to have a complete package.

All documents noted below are available from: <http://dbf.georgia.gov/dbfmtgforms> on the **MORTGAGE APPLICATIONS & INFORMATION** page, **LICENSE Application Package** option.

- **Application Package:** This document
- **GRMA – Code Sections:** **Article 13** of Chapter 1 of Title 7 of the Official Code of Georgia Annotated
- **GRMA – Regulations:** Mortgage Division Rules
- **IRS Form 4506T:** Request for Transcript of Tax Return



# NOTICE OF REQUIRED BACKGROUND CHECKS & EMPLOYEE INVESTIGATIONS

## Addendum to Instructions for a Georgia Residential Mortgage License

### **Background Checks**

All Georgia Residential Mortgage Applicants and Licensees are required to obtain background checks on all covered employees (as defined below) as a condition of employment with the applicant.

The background check must be done through the Georgia Crime Information Center (GCIC). In order to properly complete a comprehensive check, the background check authorization form **must** include all five significant identifying pieces of information on which to base the investigation: Full Name, Complete Address, Social Security Number, Date of Birth, Sex, and Race. **DO NOT** limit your search to "Felon Only". A copy of the background check authorization form is included in this application package. **(Note that no licensee may employ a felon working for the company in any state and maintain this Georgia license.)**

Background Checks which are returned that indicate that the data is incomplete or which indicate that the individual is a multi-source offender require that the employer submit fingerprint cards on that employee to the Department for further investigation. An applicant or licensee may employ the person on whom further investigation is required and has 90 days from the **initial** date of hire to obtain satisfactory background data. By Department Rule 80-11-1-.05 (1), applicants are required to submit background checks to proper law enforcement authorities to begin this investigation process within **10 business days** of initial hire. Information regarding obtaining and processing fingerprint cards is included in this application package.

Please note, however, that the Department conducts complete background checks on all individuals shown in the initial application. Please follow these application instructions for obtaining a new license regarding background checks and fingerprint cards required to properly complete your application for a license. **Requests for fingerprint cards MUST be made before submission of the application so that the completed cards can be submitted with the application.**

### **Employee Investigations**

All Georgia Residential Mortgage Applicants and Licensees are also required to examine the Department's public records [Code §7-1-1004(i)] to determine that any person they wish to employ is **not** subject to a Cease and Desist Order as defined in Code §7-1-1018. Such information may be found on the Department's web site at <http://dbf.georgia.gov/dbfmtg/>, under the option **Cease & Desist or Consent Orders**.

The abbreviated code sections on the following page are provided for your convenience. A copy of the complete Georgia Residential Mortgage Act (Article 13) is available on the Department's website. Emphasis added for your reference.

**7-1-1004. Investigation of applicant and its officers; background checks; other requirements relative to licensees. [Sections (e) and (f) covering background checks.]**

(e) The department shall be authorized to obtain conviction data with respect to any applicant or any person who is a director, officer, partner, agent, employee, or ultimate equitable owner of 10 percent or more of the applicant and any individual who directs the affairs of the company or establishes policy. The department shall submit to the Georgia Crime Information Center two complete sets of fingerprints of such applicant or such person, together with the required records search fees and such other information as may be required. Fees for background checks that the department administers shall be sent to the department by applicants and licensees together with the fingerprints. Applicants and licensees shall have the primary responsibility for obtaining background checks of **covered employees** which are defined as employees who work in this state and also have the authority to enter, delete, or verify any information on any mortgage loan application form or document. The department shall, however, retain the right to obtain conviction data on covered employees.

(f) Every licensee and applicant shall be authorized and required to obtain background checks on covered employees. Such background checks shall be handled by the Georgia Crime Information Center pursuant to Code §35-3-34 and the rules and regulations of the Georgia Crime Information Center. Licensees and applicants shall be responsible for any applicable fees charged by the center. **A background check must be initiated for a person in the employ of a licensee or applicant within ten days of the date of initial hire and be completed with satisfactory results within the first 90 days of employment.** This provision does not apply to directors, officers, partners, agents or ultimate equitable owners of 10 percent or more or to persons who direct the company's affairs or establish policy, whose background must have been investigated through the department before taking office, beginning employment, or securing ownership. Upon receipt of information from the Georgia Crime Information Center that is incomplete or that indicates an employee has a criminal record in any state other than Georgia, the employer shall submit to the department two complete sets of fingerprints of such person, together with the applicable fees and any other required information. The department shall submit such fingerprints as provided in subsection (e) of this Code section.

(i) The department may not issue a license to and may revoke a license from an applicant or licensee if such person employs any other person against whom a final **cease and desist order** has been issued within the preceding **five** years, if such order was based on a violation of O.C.G.A §7-1-1013 or based on the conducting of a mortgage business without a required license, or whose license has been revoked within **five** years of the date such person was hired. **Each applicant and licensee shall, before hiring an employee, examine the department's public records to determine that such employee is not subject to the type of cease and desist order described in this subsection.**

## **IMPORTANT NOTICE**

Fingerprint cards are processed through both the Georgia and Federal crime information centers. Although every effort will be made to process your application as quickly as possible, processing time for your application is affected by this processing of fingerprint cards through these systems. Therefore application processing time may extend from 6 to 8 weeks. **You may check the status of your application on the web at:**

**<https://bkqfin.dbf.state.ga.us/MortgageDocs/PendingApplications.html>**

**APPLICATION FOR A MORTGAGE LENDER OR MORTGAGE BROKER/PROCESSOR LICENSE  
AND FOR REGISTRATION (Forms MU1, MU2, and MU3)**  
Information and General Instructions

***IMPORTANT:*** Applicants who submit an incomplete application and who fail to complete the application within 30 days of the date additional information is requested after the initial review, or who fail to fully respond to the Department's request for additional information within 30 days, will be deemed to have abandoned the application due to inaction and to have voluntarily withdrawn the application. After 30 days, the Department will withdraw and cease processing the application. The Department will retain the \$250 application fee, but will return the licensing fee if there are no other claims (fines, etc.) against these funds.

This application is to be completed and filed by each applicant for a license to engage in a mortgage business as a: 1) lender; 2) broker; 3) processor, or 4) applicant for registration pursuant to the Georgia Residential Mortgage Act [Article 13 of Chapter 1 of Title 7 of the Official Code of Georgia Annotated (O.C.G.A.)]. When space allowed to answer a question is insufficient, a separate page should be used. Additional information and documents must be filed on 8-1/2" x 11" (letter size) paper. The application should not be filed until all required documentation is complete and included in the package. **The Department may not accept or process materially incomplete applications. Incomplete applications may be returned to the applicant without processing.** Complete applications may take between 6 to 8 weeks to process. Applications will be delayed if additional information has to be requested.

Applicants for broker, processor, or lender licenses should follow the general directions **and all applicants should follow the specific directions that are applicable to them.**

## **SUPPORTING DOCUMENTATION**

### **General**

**Grievance Policy** - Applicants for broker, processor, or lender licenses and registrations must submit a copy of the applicant's policies and procedures to receive and process customer grievances and inquiries.

**Registered Agent** – Information regarding the registered agent for service of process must be included in the application. ***The agent receives and forwards legal documents on behalf of the applicant.*** The registered agent for service of process **must** be located in the State of Georgia and **must** have an address in this state where he/she may be served. For corporate applicants, if the applicant is an entity incorporated in Georgia, the agent for service of legal process must be the same natural person or legal entity recorded with the Georgia Secretary of State. See O.C.G.A. §7-1-1003 (b)(4).

**Corporations, Limited Liability Companies, and Partnerships** - Applicants applying for a license or registration in a corporate name must include a copy of their Certificate of Incorporation. Applicants applying as a Limited Liability Company must include a copy of their Certificate of Organization. Applicants applying as a partnership must include a copy of the partnership agreement.

**Correspondence** - The Department will send all of its official correspondence, notices, and orders to the mailing address listed on the application (**not** to the registered agent). Notification of a change to this mailing address must be made to the Department within 30 days of the change. See O.C.G.A. §7-1-1006 (e). **This on-line change may be completed at <http://dbf.georgia.gov/dbfmtgforms>.** See **ONLINE INFORMATION** link.

**Business Address** – Often there are delays in processing of applications due to the volume of applications received and/or criminal history investigations. As a result an applicant may often have obtained a business location and pay for that location for a period of time although no revenue is being generated until the mortgage license is granted.

## APPLICATION INSTRUCTIONS

Applicants have the option of negotiating a business location lease which contains a contingency clause which stipulates that the lessee will not occupy the property and no rent will be due pending approval of the license. In the event that the prospective licensee can not find a property with this type of lease agreement option, applicants can provide a **proposed** business address in the application.

If the application is then approved and the licensee has had to change the place of business from the location noted in the original application, the licensee must inform the Department of the change in business location **within 30 days of conducting business from that location**. Failure to inform the Department of this change will result in a fine under O.C.G.A. §7-1-1006 (e) which states that a "licensee must notify the Department in writing of any change in the address of the principal place of business ....Notice of changes must be received by the Department no later than 30 business days after the change is effective..." All fine amounts are noted in the Department's Rule 80-11-3-.01.

### **Broker/Processor Education or Experience**

Broker/processor applicants are required to present documentation to verify compliance with the education or experience requirements imposed by O.C.G.A. §7-1-1004(c) and Department Rule 80-11-4-.01. A summary of the requirements is presented below.

#### **Education:**

Applicants must demonstrate successful completion of 40 course hours of education from an approved provider of mortgage education courses in the areas of: basic understanding of technical terms; licensing requirements; principles of the mortgage broker process; mortgage applications and required documentation; Georgia law, rules and regulations; and required books and records. Attach a copy of the certificate of completion, diploma, etc. to demonstrate completion.

A minimum of 4 hours of education must be in a course or courses covering the Georgia Residential Mortgage Act and Rules and Regulations of the Department. In addition, at least one of the remaining 36 hours shall be focused on fraud detection and prevention in the mortgage industry. The Department may verify successful completion of the required training with the provider.

Education requirements must have been completed within the one (1) calendar year period prior to the date of approval.

#### **Experience:**

Applicants must demonstrate a minimum of 2 years, **full-time**, prior experience/employment in the mortgage industry directly originating mortgage loans. The Department will consider compensation received during this 2 year period as an indicator of full-time employment status. A person who earned minimal income or closed only a few loans during the 2 year period will likely not meet the full-time employment standard. ***NOTE: Experience as a processor will NOT meet the experience requirements for a license. Experience MUST include all broker loan origination functions.***

Applicants must provide a letter on letterhead from previous employer(s) certifying completion of 2 years work experience directly originating mortgage loans. A current telephone number for such employer(s) should be provided.

Experience requirements must have been completed **within the three (3) calendar year period immediately prior to the date of approval of the license**.

Applicants must submit copies of IRS W-2 form(s) for the tax years covering the experience requirement. Income reflected should indicate that the individual earned at least a minimum- wage level of annual income in order for the Department to favorably determine that the work performed qualifies the individual as having experience in the industry.

## APPLICATION INSTRUCTIONS

Applicants for a broker or processor license relying on experience, whose principal place of business is not in Georgia and whose experience does not include brokering or processing Georgia residential mortgage loans, must still complete the 4 hours of education covering the Georgia Residential Mortgage Act.

Information submitted by applicants will be verified. Applicants who submit falsified information will be denied a license and may possibly receive a Cease and Desist Order and/or fines and penalties.

Applicants must submit an original, signed IRS Form 4506T for each year covering the experience requirement. This enables the Department to verify your W-2.

Applicants may be required to submit additional information if required by the Department and necessary to verify completion of the experience requirement.

The Department will verify compliance with the experience requirement directly with the previous employer and tax authorities.

### **Continuing Education (Brokers/Processors Only):**

Note that, once approved, brokers/processors are required to obtain 12 hours of continuing education in the 12 month period prior to the renewal deadline in order to renew their license. Credits must be obtained on an annual basis and prior to April 1 of each year (April 1 through March 31 of each year). Requirements pertaining to qualifying classes, proof of education, course content, and fines related to failure to obtain credit hours on an annual basis are contained in Department Rule 80-11-4-.01 (7).

### **Photographs**

For photographs of principals required to be attached to **Page 7 of 7** of the **MU2 Form**, those photographs should meet the specifications established for passport photographs, and must have been taken within the past 12 months. Generally, passport photographs should meet the following criteria:

- Black and white or color photographs are acceptable.
- Outside dimensions should be about 2 x 2 inches.
- The photo should be taken against a plain light-colored background without shadows.
- A full front view of the subject's head is required. The subject should not be photographed wearing a head covering. The image should be centered in the photo and the face length from chin to crown of head should be between 1 inch and 1 3/8 inches.

### **Nomenclature and d/b/a Issues**

Applicants should avoid using a business name which is already in use by another licensee. Applicants desiring to use a trade name ["doing business as" (d/b/a)] other than the name in which the license is issued should be aware that terms "Corporation", "Corp." or "Inc." should only be used for an entity which is actually incorporated. The use of a trade name using one or more of these terms where a bona fide corporation does **not** exist will not be allowed as the use of these terms could be misleading to Georgia consumers. If an actual separate corporation **does** exist, that entity will require a separate license.

A foreign corporation (not domiciled in Georgia) who wishes to operate with a trade name (fictitious name) in Georgia should file for a **"Certificate of Authority to Transact Business"** under that name with the Georgia Secretary of State. A copy of that certificate should be submitted with the license application to ensure compliance with O.C.G.A. §7-1-1006.

Applicants domiciled in Georgia should file for **Trade Name Registration** with the Superior Court in the county or counties where they choose to do business. A copy of the registration should be submitted with the license application. ***Web site domain names, if significantly different from the license name, must be registered as d/b/a names.***

## APPLICATION INSTRUCTIONS

If you are licensing an incorporated entity, limited liability company, or a partnership, please include a copy of your Certificate of Incorporation, Certificate of Organization, or your Partnership Agreement. Please be aware that the terms "Bank", "Banc", or "Trust" or other similar forms of these words cannot be used in your name without permission from this Department. It is not likely that such permission will be granted unless you qualify for registration as a chartered bank or trust company. The term "Federal" cannot be used in your name pursuant to Federal law. The term "National" cannot be used in your name without the permission of the Office of the Comptroller of the Currency, which will not be granted unless a national bank is involved. Applicants attempting to use any of these terms in their name without permission will not receive approval from this Department.

### **Background Checks & Credit History**

An MU-2 Form, (**Uniform Mortgage Biographical Statement & Consent Form**), Background Check Authorization form, and a copy of a current credit report (within the last six months) are required on the directors, officers, principals, 10% or more owners, policymakers, and managers. Filing of these forms is also required for each proposed branch or office manager, along with the MU3 **Uniform Mortgage Branch Office Form**.

**Any credit report filed with this Department containing unresolved tax liens, judgments, bankruptcies, collection items, or charged-off credit will cause the return of the application for resolution. Slow credit or bankruptcies, which have not been dismissed, will require satisfactory explanation. Tax liens, judgments, and bankruptcies must be paid or resolved before an application can be accepted for filing and review.**

The Georgia Residential Mortgage Act also provides grounds for denial of any application for a mortgage license involving persons who have failed to repay student loans [See O.C.G.A. §7-1-1017(a)(3)]. **Applicants having government supported student loans outstanding must be in "good standing" with the lender on those loans. Delinquent student loans must be brought current, or at least placed in forbearance status by the lender, before a favorable review can be accorded.** Also, where an applicant has been found to be in noncompliance with an order for child support, such action is sufficient grounds for refusal of a license. [See O.C.G.A. §7-1-1017 (a) (2)].

### **Fingerprint Cards**

Fingerprint cards must be submitted in duplicate (both originals) on all individuals required to submit background check authorizations. One complete **SET** of fingerprint cards (two cards per **SET**) is required on all persons named in the application, **including branch or office managers**. All information requested on the cards must be supplied, and please ensure that each card includes the name of the employer/applicant and their address.

**Fingerprint Cards are requested ON-LINE from the Department at the following website:**

<https://bkgfin.dbf.state.ga.us/MortgageDocs/FingerPrintCards.html>

Please follow the on-screen or enclosed instructions for completing the cards. Include the names of all individuals listed in the application for whom cards **are** required and the mailing information for delivery of the cards.

***You must request the cards in advance and have the completed cards available for submission WITH your application.***

**If you have questions regarding fingerprint cards, please e-mail your inquiry to:**

[newapps@dbf.state.ga.us](mailto:newapps@dbf.state.ga.us)

Once you have received the cards, take the cards in **blank** to the law enforcement agency to complete the information required on the card and prepare the fingerprint cards for you. Once completed, return the

## APPLICATION INSTRUCTIONS

cards along with the processing fee of \$30.00 per **SET** of cards. **This is payable by money order or certified check made payable to the Department of Banking and Finance.** Instructions for completing the cards are included in this document or on the website.

**Timely submission of fingerprint cards is very important. The processing of fingerprint cards through the state and federal systems can add additional weeks to the application process.**

### Employees:

#### **Background Checks**

Code §7-1-1004 (f) **requires that each employer obtain background checks on all employees** who work for them in the state of Georgia and who also have the authority to enter, delete, or verify any information on any mortgage loan application form or document. Background checks should be performed prior to employment and the information should be securely maintained in the employee's personnel file. By Department rule 80-11-1-.05 (1), applicants are required to submit background checks to proper law enforcement authorities ***within 10 business days of initial hire.***

In the event that the background check as submitted can not be completed in a timely manner, the applicant has a period of 90 days from the **initial** date of hire in order to obtain satisfactory background data on the individual.

If the information returned indicates that the person has a criminal record, then the applicant must submit to the Department one complete **SET** of fingerprint cards (two cards per **SET**), along with applicable fees and any other information required for further investigation. See information above regarding fingerprint cards. The cards may be requested on-line as noted above.

#### **Public Records Checks**

O.C.G.A. §7-1-1004 (i) states that the Department may not issue a license to an applicant if such person employs any other person against whom a final cease and desist order has been issued within the preceding five years, if such order was based on a violation of O.C.G.A. §7-1-1013 or based on the conducting of a mortgage business without a required license, or whose license has been revoked within five years of the date such person was hired. Each applicant, **before hiring an employee**, must examine the Department's public records to determine that such employee is not subject to the type of cease and desist order described in this subsection. This information can be located Department's web site at <http://dbf.georgia.gov/dbfmtg> , under the option **Cease & Desist or Consent Orders.**

#### **Employment Status**

Please keep in mind that an applicant may not hire or temporarily employ unlicensed individuals who conduct a mortgage business who are compensated on a 1099 or independent contractor basis unless those individuals hold a mortgage broker, processor, or lender license.

Employees are not permitted to be employed by more than one mortgage broker, mortgage processor, or mortgage lender and retain their exempt status.

Reference Department Rule 80-11-4-.03. A copy of the Mortgage Division Rules is available on the Internet with this application.

#### **"Statutory Employees" Must be Licensed**

O.C.G.A. § 7-1-1001(11) provides an exemption from the licensing requirement for "A natural person employed by a licensed mortgage broker, a licensed mortgage lender, or any person exempted from the licensing requirements of this article when acting within the scope of employment and under the supervision of the licensee or exempted person as an employee and not as an independent contractor. To be exempt, a natural person must be employed by only one such

## APPLICATION INSTRUCTIONS

employer ...." In addition, Department Rule 80-11-4-.03 provides that the employee exemption applies only to natural persons who meet all of the following criteria:

- a. An employee must be employed by just one licensee and work exclusively for that licensee;
- b. An employee may not solicit, process, or place loans for anyone else while claiming the exemption;
- c. An employee's procedures and activities must be supervised by the licensee on a daily basis, and the licensee is responsible for the actions of such employees; and
- d. An employee may not be paid or compensated for performance of mortgage activity on a 1099 basis.

The Department agrees with the position of the Internal Revenue Service that statutory employees are independent contractors. See Publication 15-A, Employer's Supplemental Tax Guide (Rev. January 2005). The Department's reading of this law indicates that under certain very limited instances, such an independent contractor may be treated as a "statutory employee" for IRS purposes. But, the person is essentially working independently. "Statutory employees," then, are not employees within the meaning of O.C.G.A. §7-1-1001(11) and do not qualify for the employee exemption from the GRMA licensing requirements.

Furthermore, the Department advises employers to be wary and to follow the procedures mandated by the IRS whenever an employee claims total exemption from withholding and his or her earnings would normally exceed \$200 per week, or if an employee claims total exemption from withholding and claims more than 10 exemptions. See Publication 15, Employer's Tax Guide (Rev. January 2005). Failure to comply with the Georgia Residential Mortgage Act and Rules of the Department may result in fines and sanctions, including the revocation of a license issued by the Department. You may access the laws and regulations concerning these and similar issues on the Department's website at <http://dbf.georgia.gov> and the IRS website at <http://www.irs.gov/>.

### **Net Branching**

NET BRANCHING is not acceptable and net branches will not be approved. Definitions of net branching vary, and only upon receipt of complete branch information will the Department be able to determine if a proposed branch (additional office) complies with Department's standards.

While other criteria may be added as this issue develops, the Department will consider the following factors in determining whether an office location qualifies as a branch or is actually a separate business/legal entity which must be licensed separately:

- Who the actual owner or lessee of the property location proposed as a branch is.
- Whether branch managers and employees are supervised W-2 employees of the applicant/licensee or are unsupervised independent contractors paid on a 1099 basis.
- Whether all required books and records are maintained at the principal place of business (Rule 80-11-2-.01). Income and expense items must be accounted for on the books of the licensee at the main location. No separate books and records may be maintained for each location (although subsidiary records may be maintained for convenience purposes).
- If you the licensee are a lender, you must provide funding for the loans generated by any branch. It is not appropriate for a lender's branch to broker loans to other lenders.
- The licensee must have consistent policies and procedures and quality control for loan origination and processing that are enforced at all the branches.
- All operating, financial, and employee records for the branch need to be kept at the main office.

If the Department discovers that a licensee is allowing a person or company to operate from an inadvertently unapproved location or via a net branch arrangement, the licensee will be fined for each unapproved location and for each unapproved branch manager [See Department Rule 80-11-3-.01, paragraphs (6) and (17)]. Revocation procedures against that licensee may be initiated as provided for

## APPLICATION INSTRUCTIONS

in O.C.G.A. §7-1-1002 (c) and O.C.G.A. §7-1-1017, and the lender may be fined for each loan generated from an unapproved location. Fine amounts are listed in the Department's Rule 80-11-3-.01.

### REVIEW OF THE APPLICATION

Generally, the Department will review the application and the accompanying documents for completeness upon receipt. Upon determination that the application is complete, the Department will conduct an investigation. An investigation of the merits of the application will not be conducted until the application is deemed complete and all requested information must be submitted before the Department can deem the application complete. Therefore, full and complete answers should be given at the outset. Additional information may be required in some cases, and the right to request such information is hereby reserved. Any person who works for the applicant who performs a mortgage broker, mortgage processor, or mortgage lender function and who is paid in whole or in part via a form 1099 for these mortgage activities must be individually licensed. **Applications received from any person who has received a Cease and Desist Order from this Department pursuant to the provisions of O.C.G.A §7-1-1018 for engaging in any prohibited act listed in O. C. G. A. §7-1-1013 will be returned to the applicant without review.**

In the case of applications for reinstatement of a previously revoked, withdrawn or denied license, all outstanding issues such as fines, fees, or documentary filings must be resolved before a favorable ruling can be accorded an application.

### Application Status Updates

Requests for application **status** updates may be made through the web at the following address:

<https://bkgfin.dbf.state.ga.us/MortgageDocs/PendingApplications.html>

**OTHER questions** regarding your application should be made via E-mail to [newapps@dbf.state.ga.us](mailto:newapps@dbf.state.ga.us). These e-mail requests receive priority attention and will facilitate responding to your information needs. ***Please allow 4 weeks processing time BEFORE requesting status information.***

### FEES

A **money order or certified check** for the fee for licensing or registration and fingerprint processing fees as set by the Department must accompany this application and must be made payable to the Department of Banking and Finance. The following fee schedule applies (include total fingerprint card fees as appropriate ***in separate payment***):

**Broker/Processor:** \$ 750 – Includes \$250 Investigation Fee and \$ 500 Licensing Fee.  
**Lender:** \$1,250 – Includes \$250 Investigation Fee and \$1,000 Licensing Fee.  
**Registration:** If you are exempt from licensing and are submitting only an application for registration, the registration fee is determined by the activities conducted by the registrant: \$500 for brokering/processing, \$1,000 for lending/servicing, in addition to the \$250 investigation fee. Branch approvals are not required for registrants.

### Fee Schedule (Payable by Money Order or Certified Check):

| Type  | Broker   | Processor | Lender  | Registered Broker | Registered Lender |
|---|--|-----------|---------|-------------------|-------------------|
| Investigation fee   | \$250  | \$250     | \$250   | \$250             | \$250             |
| License fee   | \$500  | \$500     | \$1,000 | \$500             | \$1,000           |
| Fingerprint Cards   | \$30 per set of fingerprints (2 cards in a set) Submit separate check. |           |         |                   |                   |
| Additional branch fee per branch: (1 branch included in license fee.) | \$350  | \$350     | \$350   | NA                | NA                |

## APPLICATION INSTRUCTIONS

These fees are considered part of the documentation to complete the application as detailed above. ***Applications which are not accompanied by the appropriate filing and licensing fees will not be processed.*** All checks must clear the bank before a license is mailed. Checks from applicants which are returned for insufficient funds will be subject to the charges required by O.C.G.A. §16-9-20, and will impair an applicant's ability to meet licensing standards, (see O.C.G.A. §7-1-1004 (a) regarding financial responsibility), and may cause a license to be revoked, or a pending application to be denied or administratively withdrawn. As noted previously, fees for processing fingerprint cards should be paid by separate money order or certified check made out to the Department.

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### ADDITIONAL FILING INFORMATION

#### Licensed Brokers/Processors

Refer to comments on **Page 9** related to minimum education and experience requirements applicable to applicants for a mortgage broker or processor license.

#### A. Financial Requirements

**Bond or Letter of Credit** - Submit a self prepared financial statement and a properly executed surety bond in the amount of \$50,000 **or** letter of credit from a federally insured financial institution in the amount of \$50,000 in the form prescribed by the Department. **Please download the approved form from the Internet.** If you use the surety bond option, you must use and **sign** the bond form provided in this application.

B. **Form MU2** is required for each director, senior officer, partner, ultimate equitable owner of 10% or more of the applicant or any individual who directs the affairs or establishes policy for the licensee or for the applicant. (For this purpose senior officer should include any person occupying the positions of chief executive and/or operating officer and president and any other employee, regardless of title, who is authorized to establish policy for the applicant regarding its mortgage brokering or processing activities.) The application must include a **Background Check Authorization Form** for all individuals, including proposed Branch Managers.

C. A Department **“Signature and Oath of Applicants”** certification form must be signed and submitted with original signatures. (A notary may witness the Certification Form if a corporate seal is not available.)

D. A **current credit report and fingerprint cards** (see previous instructions herein) should be submitted on each natural person, director, partner, ultimate equitable owner of 10% or more of the applicant or any individual who directs the affairs or establishes policy for the licensee. Personal financial statements and credit reports are considered confidential under the provisions of O.C.G.A. §7-1-1009 and §7-1-70.

E. **Branch Manager Requirements** – Each Georgia branch applied for should be supported by a **Form MU3**, and each branch manager should submit a **Form MU2**, a current credit report, fingerprint cards, and a criminal background check authorization form.

F. Individual applicants, principals in partnerships, corporate applicants, ultimate equitable owners of 10% or more of an incorporated applicant, and or any individual who directs the affairs or establishes policy for the licensee must supply a copy of their most recent **Federal tax return(s)**. New corporations, which have not yet filed Federal Tax returns, should include a letter of explanation.

G. Submit the most recent financial statement for the applicant. If the applicant is a newly organized entity, provide pro-forma financials containing the beginning balance sheet of the company.

## APPLICATION INSTRUCTIONS

- H. Evidence to support licensing qualification of either EDUCATION or EXPERIENCE must be provided – Copies of **educational certificate or W-2** evidence of bona fide mortgage earnings.
- I. Brokers **anticipating** using warehouse lines should refer to (H.) under LENDERS.

### Licensed Lenders

#### A. Financial Requirements

**Bond or Letter of Credit** - Submit the most recent financial statement or audit of the company along with a properly executed surety bond in the amount of \$150,000 **or** submit a letter of credit from a federally insured financial institution in the amount of \$150,000 in the form prescribed by the Department. **Please download the approved form from the Internet.** If you use the surety bond option, you must use and sign the bond form provided.

- B. **Form MU2** is required for each director, senior officer, partner, ultimate equitable owner of 10% or more of the applicant or any individual who directs the affairs or establishes policy for the licensee or for the applicant. (For this purpose senior officer should include any person occupying the positions of chief executive and/or operating officer and president and any other employee, regardless of title, who is authorized to establish policy for the applicant regarding its mortgage brokering or processing activities.) The application must include a **Background Check Authorization Form** for all individuals, including proposed Branch Managers.

- C. A Department **“Signature and Oath of Applicants”** certification form must be signed and submitted with original signatures. (A notary may witness the Certification Form if a corporate seal is not available.)

- D. A **current credit report and fingerprint cards** (see previous instructions) should be submitted on each natural person, director, partner, ultimate equitable owner of 10% or more of the applicant or any individual who directs the affairs or establishes policy for the licensee. Personal financial statements and credit reports are considered confidential under the provisions of O.C.G.A. §7-1-1009 and §7-1-70.

- E. **Branch Manager Requirements** – Each Georgia branch applied for should be supported by a **Form MU3**, and each branch manager should submit a **Form MU2**, a current credit report, fingerprint cards, and a criminal background check authorization form.

- F. Individual applicants, principals in partnerships, corporate applicants, ultimate equitable owners of 10% or more of an incorporated applicant, and or any individual who directs the affairs or establishes policy for the licensee must supply a copy of their most recent **Federal tax return(s)**. New corporations, which have not yet filed Federal Tax returns, should include a letter of explanation.

- G. Submit the most recent financial statement for the applicant. If the applicant is a newly organized entity, provide pro-forma financials containing the beginning balance sheet of the company.

- H. **Brokers using warehouse lines are considered lenders** and must meet the \$150,000 surety bond/letter of credit requirements noted above.

## APPLICATION INSTRUCTIONS

### Registered Brokers/Processors and Lenders

- A. Registrants are **wholly owned subsidiaries of a bank holding company**, or wholly owned subsidiaries of a financial institution as defined in O.C.G.A. §7-1-1001(1) and (2) which have been notified by the Department of the requirement to register as a mortgage broker, mortgage processor, or mortgage lender. In most cases **direct wholly owned subsidiaries of a financial institution will file only a notification statement, not file for registration.**
- B. Applicants for registration must complete the **Form MU1** of the application and submit a check for the registration fee, as set by the Department. The "Signature and Oath of Applicants" form must be completed with original signatures (corporate seal or notary witness is required).
- C. Applicants for **registration WILL NOT BE REQUIRED** to submit personal financial statements, including the biographical information, credit reports, fingerprint cards, and background check authorization forms on directors, senior officers, partners, branch managers and ultimate equitable owners of 10% or more of the applicant.
- D. Applicants for **registration as a LENDER** must also furnish a surety bond in the amount of \$150,000. Applicants for **registration as BROKER or PROCESSOR** must furnish the \$50,000 surety bond utilizing the form provided. In lieu of the bond, applicants may submit a letter of credit from a federally insured financial institution in the amount noted for the specific license type (broker or lender) in the form prescribed by the Department. **Please download the approved form from the Internet.** If you use the surety bond option, you must use and sign the bond form provided in this application.

### AMENDMENTS TO EXISTING LICENSES/REGISTRATIONS

- A. **UPGRADING A LICENSE:** Applicants upgrading from Broker to Lender will be required to submit a letter form request for an upgrade to the existing license or registration, along with the additional \$500 fee, a new letter of credit, bond or bond rider for the new license type in the amount of \$150,000 and must also indicate if there are in changes in management, ownership (control), or business structure. Such changes require filing of the appropriate form for approval of these changes available on the internet at <http://dbf.georgia.gov/dbfmtgforms> . If there are no changes regarding management, ownership or business structure, then only the information noted above will be required unless updates to credit reports and background information are required.
- B. **REINSTATEMENTS:** Applicants wishing to reinstate a previously licensed entity must file the documents noted above by entity type. Check the **REINSTATEMENT** box and insert the license number of the entity for which the reinstatement is being requested on the first page of this application . The same requirements and information necessary for a new license are required for a reinstatement UNLESS it has been less than six months since the license expired, in which case contact this office for guidance on the information which will be required.
- C. **CHANGE IN BUSINESS STRUCTURE, OWNERSHIP, OR MANAGEMENT:** Licensees who have changed or desire to change their business structure, ownership, or management, are required to notify the Department. In addition, licensees need to amend their original application package by filing an application amendment from the perspective of the new business structure, the new owners, or management. Please utilize the appropriate form on the web at <http://dbf.georgia.gov/dbfmtgforms> and provide any related and updated information required.

# **SAMPLE**

**\*\* Do *not* copy or return this sample. \*\***  
**\*\* It is provided as a minimum statement of acceptable policies. \*\***

## **STATEMENT OF POLICY AND PROCEDURES FOR CUSTOMER GRIEVANCES**

To provide our customers with the most professional mortgage brokerage services at our disposal.

### **PROCEDURES FOR PROCESSING A CUSTOMER'S GRIEVANCE**

1. When a grievance (either in writing or verbally) is registered with our company, we will ask to discuss the matter with the client. An in-person meeting at the company office will be offered to the client.
2. The client's file will be reviewed with the client and the specific complaints will be discussed.
3. A memo will be written to the client's file summarizing the discussion and the resolution of the complaint. A copy of the memo will be sent to the client. Any subsequent responses from the client will be placed in the client's file. A copy of the complaint and responses will be maintained in the company's required complaint file.
4. Every reasonable effort will be undertaken to satisfy the customer's complaint.
5. All client complaints will be handled by ...(insert name and title)..., who will be reasonably available during business hours.
6. A complaint which is forwarded by the Department of Banking and Finance will be promptly reviewed and a response provided to the Department within 15 business days of the receipt of the complaint by the company.



**GEORGIA DEPARTMENT OF BANKING AND FINANCE**  
**2990 Brandywine Road, Suite 200**  
**Atlanta, Georgia 30341-5565**  
**Phone: 770-986-1136**

**INSTRUCTIONS FOR COMPLETING FINGERPRINT CARDS**

**TWO COMPLETE SETS OF FINGERPRINTS ARE REQUIRED FOR EACH INDIVIDUAL LISTED IN THE APPLICATION (2 CARDS): Both cards must be completed & returned with the application.**

Please provide all information requested. **Type or print in BLACK:**

- Sign the cards
- Provide address of person being fingerprinted.
- Date of fingerprinting.
- Signature/Authorization **of law enforcement personnel** performing fingerprinting.
- Name and address of employer.
- Reason for fingerprint (if not pre-stamped):

**O.C.G.A. 7-1-1004**

**Residential Mortgage License**

- Enter name of person being fingerprinted and any **aliases**.
- Enter citizenship information.
- Enter Armed Forces Number and/or **Social Security Number**.
- **ORI** information is preprinted on the card.
- Enter date of birth.
- Fill in blanks for sex, race, height, weight, color of eyes, color of hair, and place of birth.
- Enclose **SEPARATE Money Order or Certified Check** made payable to:

**Georgia Department of Banking and Finance**

**Amount - \$30.00 per SET of fingerprints (2 cards in a set, \$15 per card)**

**Determine the following to ensure that cards are acceptable by both GBI and FBI:**

- ▶ **Prints are not too light or too dark;**
- ▶ **Prints are not smudged;**
- ▶ **Each print MUST be INSIDE the blue box for that print and not touch or cross the blue box lines.**

**TAKE CARDS IN  
BLANK TO  
POLICE  
DEPARTMENT  
AND COMPLETE  
IDENTIFIER  
INFORMATION  
THERE**

**TO OBTAIN FINGERPRINT CARDS**

**Fingerprint cards must be requested ON\_LINE at:**

<https://bkqfin.dbf.state.ga.us/MortgageDocs/FingerPrintCards.html>.

**UNIFORM MORTGAGE LENDER/MORTGAGE BROKER & REGISTRANT FORM  
FORM MU1 INSTRUCTIONS**

**A. GENERAL INSTRUCTIONS**

1. **FILING** – Form MU1 is the Uniform Mortgage Lender/Mortgage Broker business Application. Any *applicant* for a Mortgage Lender or a Mortgage Broker business license may apply to *jurisdictions* that have adopted the Uniform Application using Form MU1. An *applicant* must also refer to *jurisdiction*-specific requirements published by each *jurisdiction* in which it is applying.
2. **TERMS USED** – See the following Explanation of Terms section regarding italicized words/phrases.
3. **EXECUTION** – The execution section must be completed by an authorized representative of the *applicant*.
4. **DATES** – The filing date is the date *applicant* submits this form to the *jurisdiction(s)*. The desired effective date is the date *applicant* would like this license/registration or amendment to become effective. Review published *jurisdiction*-specific requirements for effective date expectations.
5. **AMENDMENTS** – The *applicant* must update information as required in each applicable *jurisdiction* by submitting amendments using Form MU1. **Use of the appropriate application containing the MU1 form is required and may be downloaded from <http://dbf.georgia.gov/dbfmtgforms>.** Review published *jurisdiction*-specific requirements concerning the return of the prior original license/registration document when submitting the amended Form MU1.
6. **CONTACT EMPLOYEE** – The individual listed as the contact employee must be authorized to receive all compliance and licensing information, communications, and mailings, and be responsible for disseminating it within the applicant's organization.
7. **SURRENDER / CANCEL** – When an *applicant* decides to cease operations under the license/registration, use the Form MU1 to notify *jurisdiction(s)* by checking the "Surrender/Cancel" box and completing only items 1A, 2, and 3 (indicate specific *jurisdiction(s)* in which *applicant* is ceasing operations). Send the original license/registration document (if any was issued) to the *jurisdiction(s)*. Review published *jurisdiction*-specific requirements concerning additional specific requirements at surrender/cancellation.

**B. FILING INSTRUCTIONS**

**1. FORMAT**

- A. Submit a fully completed Form MU1 to each *jurisdiction* when the *applicant* is filing for the first time. The *applicant* should review published *jurisdiction*-specific requirements for additional instructions.
- B. For the initial Form MU1 filing, the Execution section must include notarized original manual signature.
- C. Type or print all information in black.
- D. Use only the current version of Form MU1 and its Schedules or a reproduction of them.

**2. ATTACHMENTS** – Provide the following:

- A. Review published *jurisdiction*-specific instructions concerning attachments in PDF or alternative formats.
- B. File Schedules A and B only with initial applications. Use Schedule C to update Schedules A and B as needed.
- C. File a Form MU2 for each individual designated on Schedules A or C as a control person.
- D. Fees per published *jurisdiction*-specific instructions.

**B. FILING INSTRUCTIONS – continued**

- E. Some *jurisdiction(s)* require separate filings for use of fictitious, trade or “doing business as” name(s). Review published *jurisdiction*–specific instructions to determine such requirements, and attach a copy of such filing if required by that *jurisdiction*.
- F. If the *applicant* is a corporation, enclose a copy of the Articles of Incorporation, including amendments, as well as a Certificate of Good Standing issued by the domestic state. Review published *jurisdiction*–specific instructions to determine requirements for a Certificate of Good Standing from the *jurisdiction* in which application is being made.
- G. If the *applicant* is a limited liability company (LLC), enclose a copy of the Articles of Organization and operating agreement as well as a Certificate of Good Standing issued by the domestic state. Review published *jurisdiction*–specific instructions to determine requirements for a Certificate of Good Standing from the *jurisdiction* in which application is being made.
- H. If the *applicant* is a partnership of any form, enclose a copy of the partnership agreement. If the *applicant* is a limited partnership, enclose a Certificate of Good Standing issued by the domestic state. Review published *jurisdiction*–specific instructions to determine requirements for a Certificate of Good Standing from the *jurisdiction* in which application is being made.
- I. If the *applicant* is a sole proprietorship, review published *jurisdiction*–specific instructions for additional requirements.
- J. Depending on the *jurisdiction*, individual(s) originating or soliciting to originate mortgage loans at the business may need to file a Form MU4. Review published *jurisdiction*–specific instructions to verify the requirements for individuals. **MU4 forms are NOT currently required in Georgia.**
- K. Depending on the *jurisdiction*, branch offices may need to complete a Form MU3. Review published *jurisdiction*–specific instructions to verify the requirements for branch offices.
3. **FINANCIAL RESPONSIBILITY** – Review published *jurisdiction*–specific requirements in which the *applicant* is applying to determine requirements for financial responsibility. These may include the submission of financial statements, surety bond(s), minimum net worth, or other documentation.
4. **JURISDICTION-SPECIFIC REQUIREMENTS** – Review published *jurisdiction*–specific instructions from each *jurisdiction* in which the *applicant* is applying for a list of requirements unique to the *jurisdiction(s)*, including applicable fees, records retention, etc.

**C. EXPLANATION OF TERMS** – The following terms are italicized throughout Form MU1

**1. GENERAL**

**APPLICANT** – The mortgage lender or mortgage broker applying or amending information on this form. The only instance in which the *applicant* is an individual is in the case of a sole proprietorship.

**CONTROL** – The power, directly or indirectly, to direct the management or policies of a company, whether through ownership of securities, by contract, or otherwise. Any *person* that (i) is a director, general partner or executive officer; (ii) directly or indirectly has the right to vote 10% or more of a class of a voting security or has the power to sell or direct the sale of 10% or more of a class of voting securities; (iii) in the case of an LLC, Managing Member; or (iv) in the case of a partnership, has the right to receive upon dissolution, or has contributed, 10% or more of the capital, is presumed to control that company.

**CONTROL PERSON** – An individual (natural person) named in Item 1A or in Schedules A, B, or C that directly or indirectly exercises *control* over the *applicant*.

**JURISDICTION** – A state, the District of Columbia, the Commonwealth of Puerto Rico, or any subdivision or regulatory body thereof.

**PERSON** – An individual, partnership, corporation, trust, LLC or other organization.

**SETTLEMENT SERVICES** – The same as defined in federal Real Estate Settlement Procedures Act (RESPA) 12 U.S.C. Sec. 2601 et seq., Regulation X, 24 C.F.R. Part 3500 et seq.

**C. EXPLANATION OF TERMS – continued**

**2. FOR THE PURPOSE OF ITEM 8**

**CHARGED** – Being accused of a crime in a formal complaint, information, or indictment (or equivalent formal charge).

**CONTROL AFFILIATE** – A partnership, corporation, trust, LLC, or other organization that directly or indirectly *controls*, or is *controlled by*, the *applicant*.

**ENJOINED** – Includes being subject to a mandatory injunction, prohibitory injunction, preliminary injunction, or a temporary restraining order.

**FELONY** – For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a *felony* is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000. The term also includes a general court martial.

**FINANCIAL SERVICES OR FINANCIAL SERVICES RELATED** – Pertaining to securities, commodities, banking, insurance, consumer lending, or real estate (including, but not limited to; acting as or being associated with a bank or savings association, credit union, mortgage lender, mortgage broker, real estate salesperson or agent, closing agent, title company, or escrow agent).

**FOREIGN FINANCIAL REGULATORY AUTHORITY** – Includes (1) a *financial services* authority of a foreign country; (2) other governmental body empowered by a foreign government to administer or enforce its laws relating to the regulation of *financial services* or *financial services-related* activities; and (3) a foreign membership organization, a function of which is to regulate the participation of its members in *financial services* activities listed above.

**FOUND** – Includes adverse final actions, including consent decrees in which the respondent has neither admitted nor denied the findings, but does not include agreements, deficiency letters, examination reports, memoranda of understanding, letters of caution, admonishments, and similar informal resolutions of matters.

**INVOLVED** – Doing an act or omission or aiding, abetting, counseling, commanding, inducing, conspiring with or failing to reasonably supervise another in doing an act or omission.

**MISDEMEANOR** – For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a *misdemeanor* is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000. The term also includes a special court martial.

**ORDER** – A written directive issued pursuant to statutory authority and procedures, including orders of denial, suspension, or revocation; does not include special stipulations, undertakings or agreements relating to payments, limitations on activity or other restrictions unless they are included in an *order*.

**PROCEEDING** – Includes a formal administrative or civil action initiated by a governmental agency, self-regulatory organization or a *foreign financial regulatory authority*; a *felony* criminal indictment or information (or equivalent formal charge); or a *misdemeanor* criminal information (or equivalent formal charge). The term does not include other civil litigation, investigations, or arrests or similar charges affected in the absence of a formal criminal indictment or information (or equivalent formal charge).

|  |   |           |                     |           |                                       |           |                     |              |         |              |         |              |         |              |
|--|---|-----------|---------------------|-----------|---------------------------------------|-----------|---------------------|--------------|---------|--------------|---------|--------------|---------|--------------|
| <b>FORM<br/>MU1</b>  | <b>UNIFORM MORTGAGE LENDER/MORTGAGE BROKER FORM</b>   |           |                     |           | <input type="checkbox"/> LICENSE      |           |                     |              |         |              |         |              |         |              |
|  | <input type="checkbox"/> BROKER/ PROCESSOR <input type="checkbox"/> LENDER <input type="checkbox"/> UPGRADE |           |                     |           | <input type="checkbox"/> REGISTRATION |           |                     |              |         |              |         |              |         |              |
|  | <input type="checkbox"/> REINSTATEMENT: License # _____ Check Appropriate box above.                        |           |                     |           |                                       |           |                     |              |         |              |         |              |         |              |
|  | Date of filing (MM/DD/YYYY): _____ Desired Effective Date (MM/DD/YYYY): _____                               |           |                     |           | <i>Jurisdiction</i> _____             |           |                     |              |         |              |         |              |         |              |
| License Number information (if applicable) is optional. Use additional sheets if necessary.  |   | License # | <i>Jurisdiction</i> | License # | <i>Jurisdiction</i>                   | License # | <i>Jurisdiction</i> |              |         |              |         |              |         |              |
|  |   | License # | <i>Jurisdiction</i> | License # | <i>Jurisdiction</i>                   | License # | <i>Jurisdiction</i> |              |         |              |         |              |         |              |
| <input type="checkbox"/> NEW APPLICATION <input type="checkbox"/> AMENDMENT <i>To amend, circle or identify item(s) being amended.</i>   |   |           |                     |           |                                       |           |                     |              |         |              |         |              |         |              |
| <input type="checkbox"/> SURRENDER/CANCEL <input type="checkbox"/> OTHER <i>(review jurisdiction-specific instructions)</i> _____  |   |           |                     |           |                                       |           |                     |              |         |              |         |              |         |              |
| <b>1. Exact name, principal business address, mailing address, if different, and telephone numbers of <i>applicant</i>:</b><br><div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <b>(A) Full name of applicant</b><br/>         (sole proprietors provide last, first, and full middle name)<br/>         _____       </div> <div style="width: 45%;"> <b>(B) IRS Employer Identification Number</b><br/>         (Social Security Number is allowed for sole proprietorship)<br/>         _____       </div> </div>  |   |           |                     |           |                                       |           |                     |              |         |              |         |              |         |              |
| <b>(C) (1) Name under which business primarily is or will be conducted, if different from Item 1A:</b> _____<br><b>(2) List any other name(s) by which the <i>applicant</i> conducts or will conduct business and the <i>jurisdiction(s)</i> in which they are or will be used (Use additional sheets as necessary).</b> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 33%;">1. Name</td> <td style="width: 33%;">Jurisdiction</td> <td style="width: 33%;">2. Name</td> <td style="width: 33%;">Jurisdiction</td> </tr> <tr> <td>3. Name</td> <td>Jurisdiction</td> <td>4. Name</td> <td>Jurisdiction</td> </tr> </table>  |   |           |                     |           |                                       |           | 1. Name             | Jurisdiction | 2. Name | Jurisdiction | 3. Name | Jurisdiction | 4. Name | Jurisdiction |
| 1. Name  | Jurisdiction  | 2. Name   | Jurisdiction        |           |                                       |           |                     |              |         |              |         |              |         |              |
| 3. Name  | Jurisdiction  | 4. Name   | Jurisdiction        |           |                                       |           |                     |              |         |              |         |              |         |              |
| <b>(D) For amendments only:</b> If this filing reports the <i>applicant's</i> name has changed, specify whether the name change is of the:<br><input type="checkbox"/> <i>applicant</i> name (1A) or <input type="checkbox"/> business name (1C1)?<br>Enter the old name above & new <i>applicant</i> name here _____<br>or new business (trade/dba) name here _____   |   |           |                     |           |                                       |           |                     |              |         |              |         |              |         |              |
| <b>(E) Main address: (Do not use a P.O. Box)</b><br><div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 30%;">Number &amp; Street</div> <div style="width: 20%;">City</div> <div style="width: 30%;">State / Province &amp; Country</div> <div style="width: 20%;">Zip+4 / Postal Code</div> </div>  |   |           |                     |           |                                       |           |                     |              |         |              |         |              |         |              |
| <b>(F) Mailing address, if different from Main address:</b><br><div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 30%;">PO Box or Number &amp; Street</div> <div style="width: 20%;">City</div> <div style="width: 30%;">State / Province &amp; Country</div> <div style="width: 20%;">Zip+4 / Postal Code</div> </div>   |   |           |                     |           |                                       |           |                     |              |         |              |         |              |         |              |
| <b>(G) Telephone Numbers and Website:</b><br><div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 25%;">( ) - ext _____<br/>Business Phone</div> <div style="width: 25%;">( ) - _____<br/>Fax Line</div> <div style="width: 25%;">_____ Website address</div> <div style="width: 25%;">_____ e-mail address</div> </div>  |   |           |                     |           |                                       |           |                     |              |         |              |         |              |         |              |
| <b>(H) Other than the office in 1E, does the <i>applicant</i> conduct business with consumers through branch offices or other business locations?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO<br>(In certain <i>jurisdictions</i> , branch offices or other business locations must be reported or approved. <b>Use Form MU3.</b> )   |   |           |                     |           |                                       |           |                     |              |         |              |         |              |         |              |
| <b>EXECUTION:</b> The undersigned, being first duly sworn, deposes and says that he/she has executed this form on behalf of, and with the authority of, said <i>applicant</i> and agrees to and represents the following:<br>(1) That the information and statements contained herein, including exhibits attached hereto, and other information filed herewith, all of which are made a part hereof, are current, true and complete;<br>(2) To the extent any information previously submitted is not amended such information is currently accurate and complete;<br>(3) That the <i>jurisdiction(s)</i> to which an application is being submitted may conduct any investigation in accordance with state law, into the background of the <i>applicant</i> for purposes of issuing the subject licenses;<br>(4) To keep the information contained in this form current and to file accurate supplementary information on a timely basis;<br>(5) To keep accurate books and records or otherwise comply with the provisions of law pertaining to the conduct of business for which the <i>applicant</i> is applying. |   |           |                     |           |                                       |           |                     |              |         |              |         |              |         |              |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 25%;">         Notary seal here       </div> <div style="width: 45%;"> <div style="text-align: center;">           _____<br/>           Date (MM/DD/YYYY)<br/>           Signed or attested before me: _____<br/>           Print Notary Public name<br/>           on this _____ day of _____,<br/>           (Date) (Month)         </div> <div style="text-align: center; margin-top: 20px;">           _____<br/>           Notary Public signature         </div> </div> <div style="width: 30%;"> <div style="text-align: center;">           _____<br/>           Signature of <i>applicant's</i> representative<br/>           By _____<br/>           Print <i>applicant's</i> representative name<br/>           _____ at _____<br/>           (Year) (State) (County)         </div> <div style="text-align: center; margin-top: 20px;">           _____<br/>           Notary Appointment Expires (MM/DD/YYYY)         </div> </div> </div>  |   |           |                     |           |                                       |           |                     |              |         |              |         |              |         |              |
| <b><i>This execution must always be completed in full with original, manual signature and notarization.<br/>Affix notary stamp or seal where applicable.</i></b>   |   |           |                     |           |                                       |           |                     |              |         |              |         |              |         |              |

Applicant full legal name: \_\_\_\_\_

**2. Contact information for applicant:**

(A) Contact Employee:

\_\_\_\_\_  
Name and Title      (\_\_\_\_)\_\_\_\_-\_\_\_\_ ext \_\_\_\_      (\_\_\_\_)\_\_\_\_-\_\_\_\_      \_\_\_\_\_  
Business Phone      Fax Line      e-mail address

\_\_\_\_\_  
PO Box or Number & Street      City      State / Province & Country      Zip+4 / Postal Code

(B) Employee authorized to respond to consumer complaints:

\_\_\_\_\_  
Name and Title      (\_\_\_\_)\_\_\_\_-\_\_\_\_ ext \_\_\_\_      (\_\_\_\_)\_\_\_\_-\_\_\_\_      \_\_\_\_\_  
Business Phone      Fax Line      e-mail address

\_\_\_\_\_  
PO Box or Number & Street      City      State / Province & Country      Zip+4 / Postal Code

(C) Physical address of location where the official books and records of the applicant will be kept. Consult each jurisdiction for specific records retention requirements.

\_\_\_\_\_  
Records Custodian Name      (\_\_\_\_)\_\_\_\_-\_\_\_\_ ext \_\_\_\_      (\_\_\_\_)\_\_\_\_-\_\_\_\_      \_\_\_\_\_  
Business Phone      Fax Line      e-mail address

\_\_\_\_\_  
Number & Street      City      State / Province & Country      Zip+4 / Postal Code

(D) Registered Agent: In-state agent required. Must be the same as that listed with Secretary of State for Corporation, LLC, or Partnership

\_\_\_\_\_  
Name      (\_\_\_\_)\_\_\_\_-\_\_\_\_ ext \_\_\_\_      (\_\_\_\_)\_\_\_\_-\_\_\_\_      \_\_\_\_\_  
Business Phone      Fax Line      e-mail address

\_\_\_\_\_  
PO Box or Number & Street      City      State / Province & Country      Zip+4 / Postal Code

**3. Enter appropriate number in the box(es) for each jurisdiction:**

Use the **MB** box for mortgage broker/processor, the **ML** box for mortgage lender/servicer, and the **MR** box for **mortgage** registrant:

Enter "1" if **applicant is newly applying** in that *jurisdiction*

Enter "2" if **applicant has a pending application** in that *jurisdiction*

Enter "3" if **applicant is already licensed/registered** in that *jurisdiction*

Enter "4" if **applicant is surrendering/canceling** in that *jurisdiction*

Enter "5" if **applicant was formerly licensed/registered** in that *jurisdiction*.

|                      | MB | ML | MR |               | MB | ML | MR |                | MB | ML | MR |                | MB | ML | MR |
|----------------------|----|----|----|---------------|----|----|----|----------------|----|----|----|----------------|----|----|----|
| Alabama              |    |    |    | Idaho         |    |    |    | Montana        |    |    |    | Rhode Island   |    |    |    |
| Alaska               |    |    |    | Illinois      |    |    |    | Nebraska       |    |    |    | South Carolina |    |    |    |
| Arizona              |    |    |    | Indiana       |    |    |    | Nevada         |    |    |    | South Dakota   |    |    |    |
| Arkansas             |    |    |    | Iowa          |    |    |    | New Hampshire  |    |    |    | Tennessee      |    |    |    |
| California – DOC     |    |    |    | Kansas        |    |    |    | New Jersey     |    |    |    | Texas – OCC    |    |    |    |
| California – DRE     |    |    |    | Kentucky      |    |    |    | New Mexico     |    |    |    | Texas – SML    |    |    |    |
| Colorado             |    |    |    | Louisiana     |    |    |    | New York       |    |    |    | Utah           |    |    |    |
| Connecticut          |    |    |    | Maine         |    |    |    | North Carolina |    |    |    | Vermont        |    |    |    |
| Delaware             |    |    |    | Maryland      |    |    |    | North Dakota   |    |    |    | Virginia       |    |    |    |
| District of Columbia |    |    |    | Massachusetts |    |    |    | Ohio           |    |    |    | Washington     |    |    |    |
| Florida              |    |    |    | Michigan      |    |    |    | Oklahoma       |    |    |    | West Virginia  |    |    |    |
| Georgia              |    |    |    | Minnesota     |    |    |    | Oregon         |    |    |    | Wisconsin      |    |    |    |
| Guam                 |    |    |    | Mississippi   |    |    |    | Pennsylvania   |    |    |    | Wyoming        |    |    |    |
| Hawaii               |    |    |    | Missouri      |    |    |    | Puerto Rico    |    |    |    |                |    |    |    |

|  |   |
|--|---|
| <p><b>4.</b> Check type(s) of mortgage related business engaged in (or to be engaged in, if not yet active) by <i>applicant</i>.</p> <ul style="list-style-type: none"> <li>(A) First mortgage loan brokering</li> <li>(B) Second mortgage loan brokering</li> <li>(C) First mortgage lending</li> <li>(D) Second mortgage lending</li> <li>(E) First mortgage servicing</li> <li>(F) Second mortgage servicing</li> <li>(G) Home equity loans, including lines of credit</li> <li>(H) Federal Housing Administration (FHA) insured loans as an approved Loan Correspondent</li> <li>(I) Federal Housing Administration (FHA) insured loans as an approved Direct Endorsement mortgagee</li> <li>(J) Ginnie Mae _____ approved Issuer/Servicer, or Fannie Mae _____ or Freddie Mac _____ approved Seller/Servicer</li> <li>(K) Loans guaranteed by the Veterans Administration (VA)</li> <li>(L) Reverse mortgage loans</li> <li>(M) High cost home loans (refer to various state definitions of covered transactions)</li> <li>(N) Other mortgage products or settlement services (If "yes", briefly describe _____)</li> <li>(O) Credit insurance</li> <li>(P) Other _____</li> </ul>  | <p style="text-align: center;"><b>YES</b></p> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/> </div> <div style="width: 48%;"> <input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/><br/><input type="checkbox"/> </div> </div> |
| <p><b>5.</b> (A) Will <i>applicant</i> engage in any non-mortgage-related business?</p> <p>If "yes" briefly describe.</p>  | <p style="text-align: right;"><b>YES      NO</b></p> <p style="text-align: right;"><input type="checkbox"/>      <input type="checkbox"/></p>   |
| <p>(B) Will <i>applicant</i> occupy or share space with any <i>person(s)</i> engaged in <i>financial services-related</i> activity?</p> <p>If "yes," provide the name(s) of the other <i>person(s)</i>.</p>  | <p style="text-align: right;"><b>YES      NO</b></p> <p style="text-align: right;"><input type="checkbox"/>      <input type="checkbox"/></p>   |
| <p><b>6.</b> (A) Indicate legal status of <i>applicant</i>.</p> <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Corporation</span> <span><input type="checkbox"/> Sole Proprietorship</span> <span><input type="checkbox"/> Other (<i>specify</i>) _____</span> </div> <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Partnership _____ General</span> <span><input type="checkbox"/> Limited</span> <span><input type="checkbox"/> Limited Liability Company</span> </div> <p>(B) <i>Applicant's</i> fiscal year end (MM/DD): _____</p> <p>(C) If other than a sole proprietorship, indicate date and place <i>applicant</i> obtained its legal status (i.e., state or country where incorporated, where partnership agreement was filed, or where <i>applicant</i> entity was formed):</p> <p style="margin-left: 40px;">State/Province &amp; Country of formation: _____ Date of formation (MM/DD/YYYY): _____</p> <p>(D) If <i>applicant</i> is a publicly traded corporation, please insert stock symbol: _____</p> <p>(E) Name and Signature of person who will be managing the day-to-day operations of the applicant's mortgage related business.<br/>(List individual in Schedule A and complete Form MU2).</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <hr/> <p style="text-align: center;">(Signature)</p> </div> <div style="width: 45%;"> <hr/> <p style="text-align: center;">(Print Name)</p> </div> </div> <p>(F) <b>BROKER/PROCESSOR APPLICANTS ONLY:</b> Describe how the minimum education or experience requirements as required by O.C.G.A. §7-1-1004(c) and Department Rule 80-11-4-.01 will be met. (provide W2s or Educational Certificate).</p> |   |

Applicant full legal name: \_\_\_\_\_

|  |                   |      |                |                     |  |                                       |
|--|-------------------|------|----------------|---------------------|--|---------------------------------------|
| <b>7. (A)</b> Directly or indirectly, does <i>applicant control</i> or is <i>applicant</i> under common <i>control</i> with, any <i>person</i> that is engaged in the business of a mortgage lender, mortgage broker, or providers of other settlement services?   |                   |      |                |                     | <b>YES</b><br><input type="checkbox"/> | <b>NO</b><br><input type="checkbox"/> |
| <b>If no, go to item 7(B).</b><br>If yes, complete information below for each relationship. In the "Control Relationship" Column", enter "S" if the <i>applicant controls</i> the entity (subsidiary) and "A" if the <i>applicant</i> is under common <i>control</i> with the entity (affiliate). Attach additional sheets as necessary. |                   |      |                |                     |  |                                       |
| Name of Partnership, Corporation, or Organization  | Number and Street | City | State/Province | Zip + 4/Postal Code | Control Relationship                   |                                       |
|  |                   |      |                |                     |  |                                       |
|  |                   |      |                |                     |  |                                       |
|  |                   |      |                |                     |  |                                       |
|  |                   |      |                |                     |  |                                       |
|  |                   |      |                |                     |  |                                       |
|  |                   |      |                |                     |  |                                       |

Briefly describe *control* relationship(s), including an organizational chart which shows the relationship(s). Use additional sheets for comments if necessary.

|  |  |   |  |                                       |
|--|--|---|--|---------------------------------------|
| <b>(B)</b> Directly or indirectly, is <i>applicant controlled</i> by any of the following? <i>If no, go to item 8.</i> |  |   | <b>YES</b><br><input type="checkbox"/> | <b>NO</b><br><input type="checkbox"/> |
| <input type="checkbox"/> Bank Holding Company  | <input type="checkbox"/> National Bank         | <input type="checkbox"/> Savings Association/Savings Bank |  |                                       |
| <input type="checkbox"/> Credit Union  | <input type="checkbox"/> Foreign Bank          | <input type="checkbox"/> Thrift Holding Company           |  |                                       |
| <input type="checkbox"/> State Member Bank of the Federal Reserve System   | <input type="checkbox"/> State Non-Member Bank |   |  |                                       |

Financial Institution Name \_\_\_\_\_

|                   |      |                |         |                   |
|-------------------|------|----------------|---------|-------------------|
| Number and Street | City | State/Province | Country | Zip+4/Postal Code |
|-------------------|------|----------------|---------|-------------------|

 Briefly describe the *control* relationship, including an organizational chart which shows the relationship. Use additional sheets for comments if necessary.

Schedule A (direct owners) and, if applicable, Schedule B (indirect owners) must be completed as part of all initial applications. Amendments to schedules A and B must be provided on Schedule C as changes occur.

Applicant full legal name: \_\_\_\_\_

|   |  |                          |                          |
|---|--|--------------------------|--------------------------|
| <p><b>8.</b> If the answer to any of the following is "YES", provide complete details of all events or <i>proceedings</i> in an attachment, including as applicable; name and location of court, docket or case number, and status and summary of event or <i>proceeding</i>; copies of applicable charge(s), order(s), and/or consent agreement(s). Refer to the explanation of terms section of the form MU1 instructions for explanations of italicized terms. <b>Remember to file updates of these disclosures as needed.</b></p> |  |                          |                          |
| <p align="center"><b>Criminal Disclosure</b></p>  |  | <b>YES</b>               | <b>NO</b>                |
| <p>(A) Has the <i>applicant</i> or a <i>control affiliate</i> ever:</p>   |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any <i>felony</i>?</p>   |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(2) been <i>charged</i> with any <i>felony</i>?</p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(B) In the past ten years has the <i>applicant</i> or a <i>control affiliate</i>:</p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a <i>misdemeanor involving: financial services</i> or a <i>financial services-related</i> business; any fraud, false statements, or omissions; any theft or wrongful taking of property; bribery; perjury; forgery; counterfeiting; extortion; or a conspiracy to commit any of these offenses?</p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(2) been <i>charged</i> with a <i>misdemeanor</i> specified in 8(B)(1)?</p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p align="center"><b>Regulatory Action Disclosure</b></p>   |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(C) In the past ten years, has any State or federal regulatory agency or <i>foreign financial regulatory authority</i>:</p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(1) <i>found the applicant</i> or a <i>control affiliate</i> to have made a false statement or omission or been dishonest, unfair or unethical?</p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(2) <i>found the applicant</i> or a <i>control affiliate</i> to have been <i>involved</i> in a violation of a <i>financial services-related</i> regulation(s) or statute(s)?</p>   |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(3) <i>found the applicant</i> or a <i>control affiliate</i> to have been a cause of a <i>financial services-related</i> business having its authorization to do business denied, suspended, revoked or restricted?</p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(4) entered an <i>order</i> against the <i>applicant</i> or a <i>control affiliate</i> in connection with a <i>financial services-related</i> activity?</p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(5) denied, suspended, or revoked the <i>applicant's</i> or a <i>control affiliate's</i> registration or license or otherwise, by <i>order</i>, prevented it from associating with a <i>financial services-related</i> business or restricted its activities?</p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(D) Has the <i>applicant's</i> or a <i>control affiliate's</i> authorization to act as an attorney, accountant, or State or federal contractor ever been revoked or suspended?</p>   |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(E) Is the <i>applicant</i> or a <i>control affiliate</i> now the subject of any regulatory <i>proceeding</i> that could result in a "yes" answer to any part of 8(C)?</p>   |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p align="center"><b>Civil Judicial Disclosure</b></p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(F) (1) Has any domestic or foreign court:</p>   |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(a) in the past ten years <i>enjoined</i> the <i>applicant</i> or a <i>control affiliate</i> in connection with any <i>financial services-related</i> activity?</p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(b) in the past ten years <i>found the applicant</i> or a <i>control affiliate</i> to be in violation of any <i>financial services-related</i> statute(s) or regulation(s)?</p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(c) in the past ten years dismissed, pursuant to a settlement agreement, a <i>financial services-related</i> civil action brought against the <i>applicant</i> or <i>control affiliate</i> by a State or <i>foreign financial regulatory authority</i>?</p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(2) Is the <i>applicant</i> or a <i>control affiliate</i> named in any pending <i>financial services-related</i> civil action that could result in a "yes" answer to any part of 8(F)(1)?</p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p align="center"><b>Financial Disclosure</b></p>   |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(G) In the past ten years has the <i>applicant</i> or a <i>control affiliate</i> been a mortgage lender or a mortgage broker or a <i>control affiliate</i> of a mortgage lender or a mortgage broker that has been the subject of a bankruptcy petition?</p>   |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(H) Has a bonding company ever denied, paid out on, or revoked a bond for the <i>applicant</i>?</p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(I) Does the <i>applicant</i> have any unsatisfied judgments or liens against it?</p>  |  | <input type="checkbox"/> | <input type="checkbox"/> |

|   |   |                |                               |                                       |   |
|---|---|----------------|-------------------------------|---------------------------------------|---|
| <b>Schedule A</b><br><b>DIRECT OWNERS AND</b><br><b>EXECUTIVE OFFICERS</b>  | Applicant full legal name: _____<br>Date of filing (MM/DD/YYYY): _____ Desired Effective Date (MM/DD/YYYY): _____ |                |                               |                                       |   |
| 1. Use Schedule A only in new applications to provide information on the <b>direct</b> owners and executive officers of the <i>applicant</i> . Use Schedule B in new applications to provide information on <b>indirect</b> owners. File all amendments on Schedule C. <b>Complete each column.</b>   |   |                |                               |                                       |   |
| 2. List below the names of: <ul style="list-style-type: none"> <li>(a) each executive officer, including President, Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, Chief Compliance Officer, Director, and individuals with similar status or functions;</li> <li>(b) each <i>control person</i></li> <li>(c) in the case of an <i>applicant</i> that is a corporation, each shareholder that directly owns 10% or more of a class of a voting security of the <i>applicant</i>, unless the <i>applicant</i> is a publicly traded company;<br/>             Direct owners include any <i>person</i> that owns, beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 10% or more of a class of a voting security of the <i>applicant</i>. For purposes of this Schedule, a <i>person</i> beneficially owns any securities (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant or right to purchase the security.</li> <li>(d) in the case of an <i>applicant</i> that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 10% or more of the partnership's capital;</li> <li>(e) in the case of a trust that directly owns 10% or more of a class of a voting security of the <i>applicant</i>, or that has the right to receive upon dissolution, or have contributed, 10% or more of the <i>applicant's</i> capital, the trust and each trustee;</li> <li>(f) in the case of an <i>applicant</i> that is a Limited Liability Company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 10% or more of the LLC's capital, and (ii) if managed by elected managers, all elected managers; and</li> <li>(g) in certain <i>jurisdictions</i>, other required <i>persons</i>, including "qualified <i>persons</i>" or branch supervisors. Consult the <i>jurisdiction(s)</i> in which the <i>applicant</i> is applying for details. <b>GEORGIA – list in-state branch managers below and complete MU3.</b></li> </ul> |   |                |                               |                                       |   |
| 3. Are there any indirect owners of the <i>applicant</i> required to be reported on Schedule B? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>   |   |                |                               |                                       |   |
| 4. Complete the "Title or Status" column by entering board/management titles; status as a partner, trustee, sole proprietor, or shareholder; and for shareholders, the class of securities owned (if more than one is issued).  |   |                |                               |                                       |   |
| 5. (a) In the "Control Person" column, enter "Yes" if the <i>person</i> has "control" as defined in the instructions to form MU1, and "No" if the <i>person</i> does not have control. Note that under this definition, most executive officers and all 10% owners, general partners, and trustees would be "control persons". For each "Yes" response, submit Control Persons Information on form MU2.<br>(b) In the "Publicly Traded" column, if the owner is a publicly traded company, enter the stock symbol; otherwise enter "N/A."   |   |                |                               |                                       |   |
| FULL LEGAL NAME<br>(Individuals: Last Name, First Name, Middle Name)  | Title or Status   | %<br>Ownership | Control<br>Person<br>(yes/no) | Publicly<br>Traded<br>(symbol or n/a) | Company's<br>IRS Tax# or<br>Employer ID |
|   |   |                |                               |                                       |   |
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| <b>Schedule B</b><br><b>INDIRECT OWNERS</b> | <i>Applicant</i> full legal name: _____  |  |
|   | Date of filing (MM/DD/YYYY): _____      Desired Effective Date (MM/DD/YYYY): _____ |  |

Date of filing (MM/DD/YYYY): \_\_\_\_\_ Desired Effective Date (MM/DD/YYYY): \_\_\_\_\_

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|----|---|
| 1. | Use Schedule B only in new applications to provide information on the <b>indirect</b> owners of the <i>applicant</i> . Use Schedule A in new applications to provide information on <b>direct</b> owners. File all amendments on Schedule C. <b>Complete each column.</b>   |
| 2. | With respect to each owner listed on Schedule A, (except individual owners), list below: <ul style="list-style-type: none"> <li>(a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of a voting security of that corporation;<br/>For purposes of this Schedule, a <i>person</i> beneficially owns any securities (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant or right to purchase the security.</li> <li>(b) in the case of an owner that is a partnership, <b>all</b> general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership's capital;</li> <li>(c) in the case of an owner that is a trust, the trust and each trustee; and</li> <li>(d) in the case of an owner that is a Limited Liability Company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC's capital, and (ii) if managed by elected managers, all elected managers.</li> </ul> |
| 3. | Continue up the chain of ownership listing all 25% or more owners at each level. Once a public reporting company is reached, no ownership information further up the chain of ownership need be given.  |
| 4. | Complete the "Status" column by entering status as a partner, trustee, shareholder, etc. and if shareholder, class of securities owned (if more than one is issued).  |
| 5. | In the "Publicly Traded" column, if the owner is a publicly traded company, enter the stock symbol; otherwise enter "NA".   |

[illegible]

| <b>Schedule C</b><br><b>AMENDMENTS TO SCHEDULES A &amp; B</b>  | Applicant full legal name: _____<br>Date of filing (MM/DD/YYYY): _____ Desired Effective Date (MM/DD/YYYY): _____ |                                      |                |                               |                                       |  |
|--|---|--------------------------------------|----------------|-------------------------------|---------------------------------------|--|
| 1. This Schedule is used to amend Schedules A and B of Form MU1. Refer to those schedules for specific instructions for completing this Schedule C. <b>Complete each column.</b> |   |                                      |                |                               |                                       |  |
| 2. In the Type of Amendment ("Type of Amd.") column, indicate "A" (addition), "D" (deletion), or "C" (change in information about the same <i>person</i> ).                      |   |                                      |                |                               |                                       |  |
| 3. <b>List below all changes to Schedule A (DIRECT OWNERS AND EXECUTIVE OFFICERS):</b>   |   |                                      |                |                               |                                       |  |
| FULL LEGAL NAME<br>(Individuals: Last Name, First Name, Middle Name)   | Type<br>of<br>Amd.  | Title or Status                      | %<br>Ownership | Control<br>Person<br>(yes/no) | Publicly<br>Traded<br>(symbol or n/a) | Company's<br>IRS Tax #<br>or Employer ID |
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| 4. <b>List below all changes to Schedule B (INDIRECT OWNERS):</b>  |   |                                      |                |                               |                                       |  |
| FULL LEGAL NAME<br>(Individuals: Last Name, First Name, Middle Name)   | Type<br>of<br>Amd.  | Entity in Which<br>Interest is Owned | Status         | %<br>Ownership                | Publicly<br>Traded<br>(symbol or n/a) | Company's<br>IRS Tax #<br>or Employer ID |
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## SIGNATURE AND OATH OF CORPORATE APPLICANTS

I hereby swear or affirm that the information contained herein and attachments hereto are true and correct to the best of my knowledge. Further, the provisions of Official Code of Georgia Annotated Chapter 7-1, Article 13 have been reviewed by the principals of the applicant as listed herein and all employees of the applicant will be made aware of such laws and regulations and changes enacted hereafter, including the prohibited acts in Code §7-1-1013 of the Georgia Residential Mortgage Act (GRMA). It is the purpose of this application to induce the Georgia Department of Banking and Finance (the Department), its officials and examiners to grant a license to engage in the business or businesses indicated herein and any false statement or omission of material information in connection with this application shall be punished as provided by law including but not limited to revocation or suspension of the mortgage license. Furthermore, the following business practices will be adhered to by the applicant and all employees of the applicant. These practices are required by law.

1. No applications will be accepted from unlicensed brokers, processors, lenders or originators.
2. No referral fees will be paid to unlicensed persons.
3. All "employees" will be paid on a W-2 basis. Persons paid on a 1099 basis are considered to be independent contractors and will be required to have their own license.
4. The location of the business will not be changed without notification of the Department.
5. The Department will be notified within 30 days of receipt of any notice of being sued or of receiving notice of a judgment being filed.
6. The Department should be notified within one business day of a notice of a bond cancellation being received.
7. No unapproved offices will be operated.
8. The Department will be notified of all branch locations. Said locations will receive prior approval of the Department before starting business.
9. Supervision of employees is the responsibility of management. Any prohibited or fraudulent acts performed by employees may be attributed to any principal of the company.
10. No person who has been convicted of a felony will be employed unless they have complied with the conditions in Code Section 7-1-1004 of the GRMA.
11. Applicant agrees to perform background checks on all employees **prior to** employment and acknowledges that failure to perform background checks could result in significant fines and/or revocation of license.
12. Applicant acknowledges that applicant is fully aware that to purposely withhold, delete, destroy, or alter information requested in any application or to make false statements or misrepresentations on any application filed with the Department is a violation of O.C.G.A. §7-1-1013 and may result in assessment of fines, suspension or revocation of license, denial of the application, or other administrative action or a combination of these actions.

Name of Corporate Applicant: \_\_\_\_\_

By: \_\_\_\_\_

Authorized Corporate Official

CORPORATE SEAL

\_\_\_\_\_  
Title

Attest: \_\_\_\_\_

All signatures without the corporate seal require notarization:

State of \_\_\_\_\_ }

County of \_\_\_\_\_ } ss.

On the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, a notary public in and for said County, personally appeared:

Known to me to be the person(s) named in, and who executed the foregoing application and made oath that the statements and representations set forth therein are true to the best of his/her/their knowledge and belief.

NOTARY SEAL

\_\_\_\_\_  
Notary Public

County of \_\_\_\_\_

My Commission Expires \_\_\_\_\_

**SIGNATURE AND OATH OF APPLICANTS**  
**Individuals and Partners of Unincorporated Applicants**

I hereby swear or affirm that the information contained herein and attachments hereto are true and correct to the best of my knowledge. Further, the provisions of Official Code of Georgia Annotated Chapter 7-1, Article 13 have been reviewed by the principals of the applicant as listed herein and all employees of the applicant will be made aware of such laws and regulations and changes enacted hereafter, including the prohibited acts in Code §7-1-1013 of the Georgia Residential Mortgage Act (GRMA). It is the purpose of this application to induce the Georgia Department of Banking and Finance (the Department), its officials and examiners to grant a license to engage in the business or businesses indicated herein and any false statement or omission of material information in connection with this application shall be punished as provided by law including but not limited to revocation or suspension of the mortgage license. Furthermore, the following business practices will be adhered to by the applicant and all employees of the applicant. These practices are required by law.

1. No applications will be accepted from unlicensed brokers, processors, lenders or originators.
2. No referral fees will be paid to unlicensed persons.
3. All "employees" will be paid on a W-2 basis. Persons paid on a 1099 basis are considered to be independent contractors and will be required to have their own license.
4. The location of the business will not be changed without notification of the Department.
5. The Department will be notified within 30 days of receipt of any notice of being sued or of receiving notice of a judgment being filed.
6. The Department should be notified within one business day of a notice of a bond cancellation being received.
7. No unapproved offices will be operated.
8. The Department will be notified of all branch locations. Said locations will receive prior approval of the Department before starting business.
9. Supervision of employees is the responsibility of management. Any prohibited or fraudulent acts performed by employees may be attributed to any principal of the company.
10. No person who has been convicted of a felony will be employed unless they have complied with the conditions in Code Section 7-1-1004 of the GRMA.
11. Applicant agrees to perform background checks on all employees prior to employment and acknowledges that failure to perform background checks could result in significant fines and/or revocation of license.
12. Applicant acknowledges that applicant is fully aware that to purposely withhold, delete, destroy, or alter information requested in any application or to make false statements or misrepresentations on any application filed with the Department is a violation of O.C.G.A. §7-1-1013 and may result in assessment of fines, suspension or revocation of license, denial of the application, or other administrative action or a combination of these actions.

Signatures of Individuals or Partners of Unincorporated Applicant:

\_\_\_\_\_  
\_\_\_\_\_

All signatures require notarization:

State of \_\_\_\_\_}

County of \_\_\_\_\_} ss.

On the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, a notary public in and for said County, personally appeared:

\_\_\_\_\_  
Known to me to be the person(s) named in, and who executed the foregoing application and made oath that the statements and representations set forth therein are true to the best of his/her/their knowledge and belief.

NOTARY SEAL

\_\_\_\_\_  
Notary Public

County of \_\_\_\_\_

My Commission Expires \_\_\_\_\_

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**GEORGIA DEPARTMENT OF BANKING AND FINANCE  
2990 BRANDYWINE ROAD, SUITE 200  
ATLANTA, GEORGIA 30341-5565**

Bond No. \_\_\_\_\_

# B O N D

Amount \$ \_\_\_\_\_

KNOW ALL MEN BY THESE PRESENTS, That

\_\_\_\_\_  
(Name of Applicant/Principal)

\_\_\_\_\_  
(Business Address of Applicant)

of the City of \_\_\_\_\_, County of \_\_\_\_\_, and State of \_\_\_\_\_,

as principal, and \_\_\_\_\_ of the City of \_\_\_\_\_,  
(Name of Surety)

County of \_\_\_\_\_, State of \_\_\_\_\_, as surety, are held and firmly bound unto the State of Georgia for the use and benefit of the State and of any claimant against the principal or his agents in the principal sum of \_\_\_\_\_ Dollars (\$\_\_\_\_\_), for the payment of which, well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally by these presents.

WHEREAS, the above named principal has applied to the Georgia Department of Banking and Finance for a license to engage in business under the Georgia Residential Mortgage Act (GRMA), Article 13 of Chapter 1 of Title 7 of the Official Code of Georgia Annotated, as amended. NOW, THEREFORE, the condition of the foregoing obligation is such that if the principal obligor shall comply with the provisions of said Georgia Residential Mortgage Act, all regulations duly promulgated thereunder, and all other laws applicable to the conduct of its business, and shall pay any and all monies that may become due and owing to the State of Georgia which shall include, but not be limited to monies owed for fees, fines or penalties under and by virtue of the provisions of the GRMA or the Rules of the Department of Banking and Finance, and shall pay any and all monies that may become due and owing any person due to the violation of any such laws and regulations by the principal through its own acts or the acts of any agent of the principal, then this obligation will be void: otherwise the same will remain in full force and effect. All of the proceeds under this bond are to be made available to claimants or to the Department for fees, fines or penalties due. No portion of the available proceeds is to be retained by the surety through any means for the recovery of attorney's fees or any other legal or administrative costs.

This obligation is issued under and is governed by O.C.G.A. Section 7-1-1003.2 and the obligations of the surety shall be those therein set forth.

This bond becomes effective as of \_\_\_\_\_, 20\_\_\_\_, in support of any license issued to Principal by the Georgia Department of Banking and Finance. This obligation may be continued by appropriate license renewal certificate issued for subsequent years. Pursuant to O.C.G.A. Section 7-1-1007(b), this bond may not be canceled by either the licensee or the corporate surety except upon notice to the Department of Banking and Finance by registered or certified mail with return receipt requested, the cancellation to be effective not less than 30 days after receipt by the Department of Banking and Finance of such notice and only with respect to any breach of condition occurring after the effective date of such cancellation.

Provided further that regardless of the number of years this bond remains in force or the number of premiums paid, the total aggregate liability of the Surety shall not exceed the principal amount of the bond required to be maintained by the Principal in order to keep its license.

By signing below, the Principal hereby agrees to the release of the payment status of fines assessed by the Department of Banking and Finance to the Surety. Such disclosure by the Department of Banking and Finance to the Surety shall be limited to whether the Principal has paid any fines assessed in full as of the date of request. The Department of Banking and Finance shall be entitled to rely on a copy of the release signed by the licensee when releasing such information.

WITNESS WHEREOF, the parties hereto have hereunto set our hands and affixed our seals  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

(SEAL)

\_\_\_\_\_  
Principal

By: \_\_\_\_\_

Title: \_\_\_\_\_

(SEAL)

\_\_\_\_\_  
Surety

By: \_\_\_\_\_

Title: \_\_\_\_\_

### **BONDS FOR MORTGAGE APPLICANTS**

The Department has been informed that the following companies are writing bonds for Mortgage Brokers and Lenders. Other companies may also offer this service; however, any company offering this service must be approved to issue surety bonds by the Georgia Insurance Commissioner. This list is **NOT** a recommendation of the companies.

| <b>Company</b>                                 | <b>Contact</b>                | <b>Address</b>                            | <b>City, ST, Zip</b>        | <b>Phone/Web</b>  |
|--|-------------------------------|---|-----------------------------|---|
| <b>1st Metro Insurance Inc.</b>                | Vernon L. Cooper              | 11660 Alpharetta Highway, Suite 545       | Roswell, GA 30076           | <b>(770) 985-9155</b><br><b>(404) 963-0356</b><br><b>AISGroup.us</b>                    |
| <b>Artisan Bonding Insurance Services, LLC</b> | Raylene Mendoza               | 155 Rochester Street                      | Costa Mesa, CA 92627        | <b>(800) 598-7535</b><br><b>Fax: (949) 515-2984</b><br><b>artisanbonding.com</b>        |
| <b>BDH Associates, Inc.</b>                    | Bob or Diane Hrehor           | 4572 Lawrenceville Hwy., Suite 201        | Lilburn, GA 30047-3688      | <b>(770) 564-2999</b><br><b>Fax: (770) 564-9327</b><br><b>bdhassociates.com</b>         |
| <b>Bond Exchange, The</b>                      | Ami Ashmore                   | 10025 W. Markham Suite 240                | Little Rock, AR 72205       | <b>(888) 545-0220</b><br><b>Fax: (501) 325-1259</b><br><b>thebondexchange.com</b>       |
| <b>Contract Bond Source, Inc.</b>              | Jane E. Worth                 | 5360 Gum Creek Court                      | Loganville, GA              | <b>(770) 788-2897</b><br><b>Fax: (770) 788-2369</b>                                     |
| <b>E.R. Munro &amp; Company</b>                | Erin Montoya                  | 14 Wood Street                            | Pittsburgh, PA 15222-1921   | <b>(412) 281-0673</b><br><b>Fax: (421) 281-4014</b><br><b>ermunro.com</b>               |
| <b>Federal Bonding, Inc. The Bond Market</b>   | Norman E. Atkins              | P.O. Box 1328                             | Duluth, GA 30096            | <b>(770) 458-6766</b><br><b>Fax: (770) 246-9826</b>                                     |
| <b>Georgia Ins. Brokerage, Inc.</b>            | Nikki Bradford                | 193 Auburn Ave., NE                       | Atlanta, GA 30303-2519      | <b>(404) 525-1600</b><br><b>Fax: (404) 525-1613</b>                                     |
| <b>Hamby &amp; Aloisio</b>                     | Vic Hamby                     | 53 Perimeter Center East, Suite 400       | Atlanta, GA 30346-2294      | <b>(770) 551-3270</b><br><b>Fax: (770) 551-3289</b><br><b>hains.com</b>                 |
| <b>James A. Scott Insurance</b>                | Cary Hammock or Joanna Carson | 1301 Old Graves Mill Road, PO Box 10489   | Lynchburg, VA 24506         | <b>(434) 832-2100</b><br><b>Fax: (434) 832-2190</b><br><b>www.scottins.com</b>          |
| <b>Merritt &amp; McKenzie, Inc.</b>            | Sharon Dixon                  | 200 Galleria Pky. Suite 600               | Atlanta, GA 30339           | <b>(404) 266-7160</b><br><b>Fax: (404) 266-7199</b><br><b>merrittmckenzie.com</b>       |
| <b>Mortgage Ins. Agency, Ltd.</b>              | David J. Jackson              | 9233 S IL Route 31                        | Lake in the Hills, IL 60156 | <b>(847) 458-9900</b><br><b>Fax: (847) 458-9307</b><br><b>www.mtgins.com</b>            |
| <b>Oxley &amp; Goldburn Ins., Inc.</b>         | Edward Rosenthal              | 204 Monroe St., Suite 210                 | Rockville, MD 20850         | <b>(800) 958-2663</b><br><b>Fax: (301) 251-1479</b><br><b>oxley-goldburn.com</b>        |
| <b>Surety Group, The</b>                       | Sam H. Newberry               | 1900 Emery St. NW, Ste 120                | Atlanta, GA 30318-2569      | <b>(404) 352-8211</b><br><b>Fax: (404) 351-3237</b><br><b>suretygroup.com</b>           |
| <b>Viking Bond Service, Inc.</b>               | Tammi Jepson                  | 11361 N. 99 <sup>th</sup> Ave., Suite 107 | Peoria, AZ 85345            | <b>(888) 278-7389 ext 54</b><br><b>Fax 623-933-9376</b><br><b>vikingbondservice.com</b> |
| <b>Warnock Agency, Inc., The</b>               | Lamon Warnock                 | 4528C McEver Road                         | Oakwood, GA 30566           | <b>(678) 450-8003</b><br><b>Fax: (678) 450-7333</b><br><b>warnockagency.com</b>         |

## Approved Educational Facilities

### **Advanced Education Systems, LLC, dba Training Pro**

11350 McCormick Rd., Executive Plaza III  
Suite 1001  
Hunt Valley, MD 21031  
Ph. #: 877-878-3600 (Ms. Jen Eyre)  
[www.trainingpro.com](http://www.trainingpro.com)

### **All Star Professional Training, Inc.**

P. O. Box 768  
Arlington, TX 76004  
Ph. #: 817-259-0980 (Ms. Charlotte Marsalis)  
Fax #: 972-606-2148  
[www.allstarce.com](http://www.allstarce.com)

### **American Institute of Mortgage Finance**

3469 Lawrenceville Highway, Suite 100  
Tucker, GA 30084  
Ph. #: 770-668-0017 (Dr. Eric T. Martin)  
[www.amedinstitute.com](http://www.amedinstitute.com)

### **Ameritrain Mortgage Institute**

2785 Lawrenceville Highway, Suite 202  
Decatur, GA 30033  
Ph. #: 678-406-0333 (Ms. Carol Wilson)  
Fax #: 800-655-1398  
[www.mtgeorgia.com](http://www.mtgeorgia.com)

### **Avionce Institute of Mortgage Banking**

2189 Northlake Parkway, Ste 106  
Tucker, GA 30084  
Ph. #: 678-406-9100 (Ms. Doris A. Crosby)  
Fax #: 678-406-9300  
[www.avionce.com](http://www.avionce.com)

### **Capstone Institute of Mortgage Finance**

2000 Powers Ferry Road, Suite 2-3  
Marietta, GA 30067  
Ph. #: 770-956-8252 (Ms. Kathleen Lewis)  
Fax #: 770-952-3289  
[www.capinst.com](http://www.capinst.com)

### **Executive Training Centers**

d/b/a ProEducate  
4200 S. I-10 Service Rd. West, Suite 134  
Metairie, LA 70001  
Ph. #: 504-454-9866 (Dr. Roy L. Ponthier, PhD)  
Fax #: 504-888-0346  
[www.proeducate.com](http://www.proeducate.com)

### **Financial Strategies**

695 Pro - Med Lane  
Carmel, IN 43062  
Ph. #: 866-411-9752 (Ms. Dawn Hennessey)  
Fax #: 317-566-0601  
<https://www.mymortgagetrainer.com>

### **Georgia Association of Mortgage Brokers Educational Foundation (GAMBEF)**

P.O. Box 1133  
Alpharetta, GA 30009  
Ph. #: 770-751-9820 (Mr. Frank "Paco" Torch)  
eFax #: 404-393-8975  
[www.gamb.org/education](http://www.gamb.org/education)

### **LenderMax Institute of Technology**

3245 Peachtree Pkwy, Suite 263  
Suwanee, GA 30024  
Ph. #: 678-965-6952 (Ms. Rebekah Watson)  
Fax #: 404-506-9690  
<http://lendermax.com>

### **Mortgage Bankers Association**

1919 Pennsylvania Avenue, NW  
Washington, DC 20006  
Ph. #: 202-557-2763 (Ms. Jennifer Ridings)  
[www.campusmba.org](http://www.campusmba.org)

### **Mortgage Research, Inc.**

105 Oscar Lane  
Dallas, GA 30132  
Ph. #: 770-792-6780 (Mr. Dan Johnson)  
[www.mortgage-education.com](http://www.mortgage-education.com)

### **School of Mortgage Lending**

91 Point Judith Road, Suite 301  
Narragansett, RI 02882  
Ph. #: 800-724-8582 (Ms. Susan Williams)  
Fax #: 425-822-0298  
[www.schoolofmortgagelending.com/index.html](http://www.schoolofmortgagelending.com/index.html)

## FORM MU2 INSTRUCTIONS

### UNIFORM MORTGAGE BIOGRAPHICAL STATEMENT & CONSENT FORM FORM MU2 INSTRUCTIONS

#### A. GENERAL INSTRUCTIONS

1. **FILING** – Form(s) MU2 must accompany Form MU1, the Uniform Mortgage Lender/Mortgage Broker form. Each individual identified as a *control person* for the *applicant* on Schedule A of Form MU1, must complete Form MU2. An *applicant* must also refer to *jurisdiction*-specific requirements published by each *jurisdiction* in which it is applying. Some *jurisdictions* may require biographical information about people that do not fit the *control person* definition, like a **branch manager**. Such *jurisdictions* may therefore request a Form MU2 with other filings. Additionally, *applicants* must update the roster of *control persons* on Form MU1 by filing a Schedule C, thus requiring additional MU2 forms.
2. **EMPLOYMENT REPRESENTATION** – The employment representation section must be completed by an authorized representative of the *applicant*.
3. **TERMS USED** – See the following Explanation of Terms section regarding italicized words/phrases.
4. **DATES** – The filing date is the date *applicant* submits this form to the *jurisdiction(s)*. The desired effective date is the date *applicant* would like the license/registration or amendment to become effective. Review published *jurisdiction*-specific requirements for effective date expectations.
5. **AMENDMENTS** – The *applicant* must update biographical information as required in each *jurisdiction* by submitting amendments using Form MU2. On Form MU2, circle or otherwise identify the item being amended. Complete only items 1(A) and 1(I), as well as the information that is being amended. Review published *jurisdiction*-specific requirements concerning the return of the prior original license/registration document when submitting the amended Form MU2.

#### B. FILING INSTRUCTIONS

1. **FORMAT**
  - A. Each individual identified as a *control person* on Schedules A or C must complete Form MU2. A fully completed Form MU2 for each *control person* is required to be submitted to each *jurisdiction* along with the *applicant's* initial Form MU1. Form MU2 also accompanies Schedule C when reporting new *control person(s)*. The *applicant* should review published *jurisdiction*-specific requirements for additional specific filing requirements using Form MU2 providing biographical information about non-*control persons*.
  - B. Type or print all information in black.
  - C. Use only the current version of Form MU2 or a reproduction of it.
  - D. The Acknowledgment & Consent section must include notarized original manual signature.
  - E. The Mortgage Lender/Mortgage Broker Employment Representation section must include original manual signature.
  - F. Employment history, item 6: provide the full legal name of the company, beginning with your current employer. For the purposes of this history, include both 1099 independent contractor assignments as well as W-2 status employment.
2. **ATTACHMENTS** - Review published *jurisdiction*-specific for required attachments including but not limited to:
  - A. Review published *jurisdiction*-specific instructions concerning attachments in PDF or alternative formats.
  - B. Two Fingerprint Cards, if required by applicable *jurisdiction(s)*, per item 4 of Form MU2
  - C. Personal credit report, bond, or other demonstration of financial responsibility
  - D. Depending on the *jurisdiction*, individual(s) originating mortgage loans at the business may need to file a Form MU4. Review published *jurisdiction*-specific requirements for details. **Not required in Georgia.**
  - E. Fees

## FORM MU2 INSTRUCTIONS

### C. **EXPLANATION OF TERMS** – The following terms are italicized throughout Form MU2

#### 1. **GENERAL**

**APPLICANT** – The mortgage lender or mortgage broker applying on or amending information on Form MU1 (including schedules) or Form MU3. The only instance in which the *applicant* is an individual is in the case of a sole proprietorship.

**CONTROL** – The power, directly or indirectly, to direct the management or policies of a company, whether through ownership of securities, by contract, or otherwise. Any *person* that (i) is a director, general partner or executive officer; (ii) directly or indirectly has the right to vote 10% or more of a class of a voting security or has the power to sell or direct the sale of 10% or more of a class of voting securities; (iii) in the case of an LLC, Managing Member; or (iv) in the case of a partnership, has the right to receive upon dissolution, or has contributed, 10% or more of the capital, is presumed to control that company.

**CONTROL PERSON** – An individual (a natural person) named on Form MU1 in Item 1A or in Schedules A, B, or C that directly or indirectly exercises *control* over the *applicant*.

**JURISDICTION** – A state, the District of Columbia, the Commonwealth of Puerto Rico, any territory of the United States, or any subdivision or regulatory body thereof.

**PERSON** – An individual, partnership, corporation, trust, LLC, or other organization.

#### 2. **FOR THE PURPOSE OF ITEM 8**

**CHARGED** – Being accused of a crime in a formal complaint, information, or indictment (or equivalent formal charge).

**ENJOINED** – Includes being subject to a mandatory injunction, prohibitory injunction, preliminary injunction, or a temporary restraining order.

**FELONY** – For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a *felony* is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000. The term also includes a general court martial.

**FINANCIAL SERVICES OR FINANCIAL SERVICES-RELATED** – Pertaining to securities, commodities, banking, insurance, consumer lending, or real estate (including, but not limited to; acting as or being associated with a bank or savings association, credit union, mortgage lender, mortgage broker, real estate salesperson or agent, closing agent, title company, or escrow agent).

**FOREIGN FINANCIAL REGULATORY AUTHORITY** – Includes (1) a *financial services* authority of a foreign country; (2) other governmental body empowered by a foreign government to administer or enforce its laws relating to the regulation of *financial services* or *financial services-related* activities; and (3) a foreign membership organization, a function of which is to regulate the participation of its members in *financial services* activities listed above.

**FOUND** – Includes adverse final actions, including consent decrees in which the respondent has neither admitted nor denied the findings, but does not include agreements, deficiency letters, examination reports, memoranda of understanding, letters of caution, admonishments, and similar informal resolutions of matters.

**INVOLVED** – Doing an act or omission or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act or omission.

**MISDEMEANOR** – For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a *misdemeanor* is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000. The term also includes a special court martial.

**ORDER** – A written directive issued pursuant to statutory authority and procedures, including orders of denial, suspension, or revocation; does not include special stipulations, undertakings or agreements relating to payments, limitations on activity or other restrictions unless they are included in an *order*.

**PROCEEDING** – Includes a formal administrative or civil action initiated by a governmental agency, self-regulatory organization or a *foreign financial regulatory authority*; a *felony* criminal indictment or information (or equivalent formal charge); or a *misdemeanor* criminal information (or equivalent formal charge). The term does not include other civil litigation, investigations, or arrests or similar charges affected in the absence of a formal criminal indictment or information (or equivalent formal charge).

Form MU2 Dated 1/17/2007 - 2005 © Conference of State Bank Supervisors Page 3 of 7

Applicant full legal name: \_\_\_\_\_ Individual's full legal name: \_\_\_\_\_

**3. Mortgage Lender/Mortgage Broker Employment Representation:**

To the best of my knowledge and belief, the *control person* is currently bonded where required, and, at the time of approval, this individual will be familiar with the statutes, regulations, and rules of the *jurisdiction(s)* with which this application is being filed, and will be fully qualified for the position for which application is being made herein. I have taken appropriate steps to verify the accuracy and completeness of the information contained in and with this application. I have provided the individual an opportunity to review the information contained herein and the individual has approved this information and signed the form.

|              |                               |  |
|--------------|-------------------------------|--|
|              | by :                          |  |
| Company Name | Signature of authorized party | Print Name and Title of authorized party |

***Employment Representation must always be completed in full with original, manual signature.  
Affix notary stamp or seal where applicable.***

**4. Fingerprint Information filing representation:**

- ☐ I represent that I am submitting, have submitted, or promptly will submit to the appropriate jurisdiction(s) two fingerprint cards as required.
- ☐ I am applying for a mortgage individual license/registration only in jurisdiction(s) that do not require me to submit fingerprint cards.

**5. Residential History:** Starting with current address (item 1K), give all addresses for the past 10 years. (Attach additional sheets as necessary.)

| From<br>(MM/YYYY) | To<br>(MM/YYYY) | Street Address | City | State or<br>Province | Zip or<br>Postal<br>Code | Country |
|-------------------|-----------------|----------------|------|----------------------|--------------------------|---------|
|                   |                 |                |      |                      |                          |         |
|                   |                 |                |      |                      |                          |         |
|                   |                 |                |      |                      |                          |         |
|                   |                 |                |      |                      |                          |         |
|                   |                 |                |      |                      |                          |         |
|                   |                 |                |      |                      |                          |         |
|                   |                 |                |      |                      |                          |         |
|                   |                 |                |      |                      |                          |         |
|                   |                 |                |      |                      |                          |         |
|                   |                 |                |      |                      |                          |         |
|                   |                 |                |      |                      |                          |         |

**6. Employment History:** Provide complete employment history for the past 10 years. Account for all time including full & part-time employments, self-employment, military service, and homemaking. Also include periods such as unemployed, full-time student, extended travel, etc. Indicate by "YES" or "NO" whether this employment was *financial service-related* business. (Attach additional sheets as needed.)

| From<br>(MM/YYYY) | To<br>(MM/YYYY) | Employer<br>(company name) | Position Held | City | State or<br>Province | Country | YES or<br>NO? |
|-------------------|-----------------|----------------------------|---------------|------|----------------------|---------|---------------|
|                   |                 |                            |               |      |                      |         |               |
|                   |                 |                            |               |      |                      |         |               |
|                   |                 |                            |               |      |                      |         |               |
|                   |                 |                            |               |      |                      |         |               |
|                   |                 |                            |               |      |                      |         |               |
|                   |                 |                            |               |      |                      |         |               |
|                   |                 |                            |               |      |                      |         |               |
|                   |                 |                            |               |      |                      |         |               |
|                   |                 |                            |               |      |                      |         |               |
|                   |                 |                            |               |      |                      |         |               |

Applicant full legal name: \_\_\_\_\_ Individual's full legal name: \_\_\_\_\_

|   |   |   |
|---|---|---|
| <p><b>7. Other Business:</b> Are you currently engaged in any other business either as a proprietor, partner, officer, director, employee, trustee, agent or otherwise? (Please exclude non-<i>financial services-related</i> activity that is exclusively charitable, civic, religious, or fraternal and is recognized as tax exempt.) If YES, provide the following details: the name of the other business; whether the business is <i>financial services-related</i>; the address of the other business; the nature of the other business; your position, title, or relationship with the other business; the start date of your relationship; the approximate number of hours per month you devote to the other business; and briefly describe your duties relating to the other business. (Attach additional sheets as needed.)</p> <p><b>Details:</b></p>  | <p><b>YES</b></p> <p><input type="checkbox"/></p>   | <p><b>NO</b></p> <p><input type="checkbox"/></p>  |
| <p><b>8. Disclosures:</b> If the answer to any of the following is "YES", provide complete details of all events or proceedings in an attachment. Refer to the explanation of terms section of the instructions for explanations of italicized terms.</p>   |   |   |
| <p style="text-align: center;"><b>Financial Disclosure</b></p> <p>(A) Within the past ten years:</p> <p>(1) have you filed a personal bankruptcy petition or been the subject of an involuntary bankruptcy petition?</p> <p>(2) based upon events that occurred while you exercised <i>control</i> over any organization, have any filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition?</p> <p>(B) Has a bonding company ever denied, paid out on, or revoked a bond for you?</p> <p>(C) Do you have any unsatisfied judgments or liens against you?</p>  | <p><b>YES</b></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>   | <p><b>NO</b></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>  |
| <p style="text-align: center;"><b>Criminal Disclosure</b></p> <p>(D) Have you ever:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any <i>felony</i>?</p> <p>(2) been <i>charged</i> with any <i>felony</i>?</p> <p>(E) Based upon activities that occurred while you exercised <i>control</i> over it, has an organization ever:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any <i>felony</i>?</p> <p>(2) been <i>charged</i> with any <i>felony</i>?</p> <p>(F)</p> <p>(1) Have you ever been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a <i>misdemeanor involving: financial services</i> or a <i>financial services-related</i> business; any fraud, false statements, or omissions; any theft or wrongful taking of property; bribery; perjury; forgery; counterfeiting; extortion; or a conspiracy to commit any of these offenses?</p> <p>(2) Are there pending charges against you for a <i>misdemeanor as described</i> in 8(F)(1)?</p> <p>(G) Based upon activities that occurred while you exercised <i>control</i> over it, has an organization ever:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a <i>misdemeanor</i> specified in 8(F)(1)?</p> <p>(2) been <i>charged</i> with a <i>misdemeanor</i> specified in 8(F)(1)?</p> | <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> | <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> |

Applicant full legal name: \_\_\_\_\_ Individual's full legal name: \_\_\_\_\_

|   | YES                      | NO                       |
|---|--------------------------|--------------------------|
| <b>Regulatory Action Disclosure</b>   |                          |                          |
| (H) Has any State or federal regulatory agency or <i>foreign financial regulatory authority</i> ever:   |                          |                          |
| (1) <i>found</i> you to have made a false statement or omission or been dishonest, unfair or unethical?   | <input type="checkbox"/> | <input type="checkbox"/> |
| (2) <i>found</i> you to have been <i>involved</i> in a violation of a <i>financial services-related</i> regulation(s) or statute(s)?  | <input type="checkbox"/> | <input type="checkbox"/> |
| (3) <i>found</i> you to have been a cause of a <i>financial services-related</i> business having its authorization to do business denied, suspended, revoked or restricted?   | <input type="checkbox"/> | <input type="checkbox"/> |
| (4) entered an <i>order</i> against you in connection with a <i>financial services-related</i> activity?  | <input type="checkbox"/> | <input type="checkbox"/> |
| (5) denied, suspended, or revoked your registration or license, disciplined you, or otherwise by <i>order</i> , prevented you from associating with a <i>financial services-related</i> business or restricted your activities? | <input type="checkbox"/> | <input type="checkbox"/> |
| (6) barred you from association with an entity regulated by such commission, authority, agency, or officer, or from engaging in a <i>financial services-related</i> business?   | <input type="checkbox"/> | <input type="checkbox"/> |
| (7) issued a final <i>order</i> based on violations of any law or regulations that prohibit fraudulent, manipulative, or deceptive conduct?   | <input type="checkbox"/> | <input type="checkbox"/> |
| (I) Have you ever had an authorization to act as an attorney, accountant, or State or federal contractor that was revoked or suspended?   | <input type="checkbox"/> | <input type="checkbox"/> |
| (J) Are you now the subject of any regulatory <i>proceeding</i> that could result in a "yes" answer to any part of 8(H) or 8(I)?  | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Civil Judicial Disclosure</b>  |                          |                          |
| (K) (1) Has any domestic or foreign court ever:   |                          |                          |
| (a) <i>enjoined</i> you in connection with any <i>financial services-related</i> activity?  | <input type="checkbox"/> | <input type="checkbox"/> |
| (b) <i>found</i> that you were <i>involved</i> in a violation of any <i>financial services-related</i> statute(s) or regulation(s)?   | <input type="checkbox"/> | <input type="checkbox"/> |
| (c) dismissed, pursuant to a settlement agreement, a <i>financial services-related</i> civil action brought against you by a State, federal, or <i>foreign financial regulatory authority</i> ?                                 | <input type="checkbox"/> | <input type="checkbox"/> |
| (2) Are you named in any pending <i>financial services-related</i> civil action that could result in a "yes" answer to any part of 8K(1)?   | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Customer Arbitration/Civil Litigation Disclosure</b>   |                          |                          |
| (L) Have you ever been named as a respondent/defendant in a <i>financial services-related</i> consumer-initiated arbitration or civil litigation which:   | <input type="checkbox"/> | <input type="checkbox"/> |
| (1) is still pending; or  | <input type="checkbox"/> | <input type="checkbox"/> |
| (2) resulted in an arbitration award or civil judgment against you, regardless of amount, or that required corrective action; or  | <input type="checkbox"/> | <input type="checkbox"/> |
| (3) was settled for any amount?   | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Termination Disclosure</b>   |                          |                          |
| (M) Have you ever voluntarily resigned, been discharged, or permitted to resign after allegations were made that accused you of:  | <input type="checkbox"/> | <input type="checkbox"/> |
| (1) violating statute(s), regulation(s), rule(s), or industry standards of conduct?   | <input type="checkbox"/> | <input type="checkbox"/> |
| (2) fraud, dishonesty, theft, or the wrongful taking of property?   | <input type="checkbox"/> | <input type="checkbox"/> |

## FORM MU2-DEPARTMENT REQUIRED INFORMATION

*Applicant* full legal name: \_\_\_\_\_

Individual's full legal name: \_\_\_\_\_

Date of Application: \_\_\_\_\_

Attach Passport Photo of Individual submitting MU2.

Those photographs should meet the specifications established for passport photographs, and must have been taken within the past 12 months. Generally, passport photographs should meet the following criteria:

- Black and white or color photographs are acceptable.
- Outside dimensions should be about 2 x 2 inches.
- The photo should be taken against a plain light-colored background without shadows.
- A full front view of the subject's head is required. The subject should not be photographed wearing a head covering. The image should be centered in the photo and the face length from chin to crown of head should be between 1 inch and 1 3/8 inches.

